

Blackwell
Rural District Council.

ANNUAL REPORT

FOR

1913.

BY

JOHN O. LITTLEWOOD, D.P.H.,

MEDICAL OFFICER OF HEALTH,

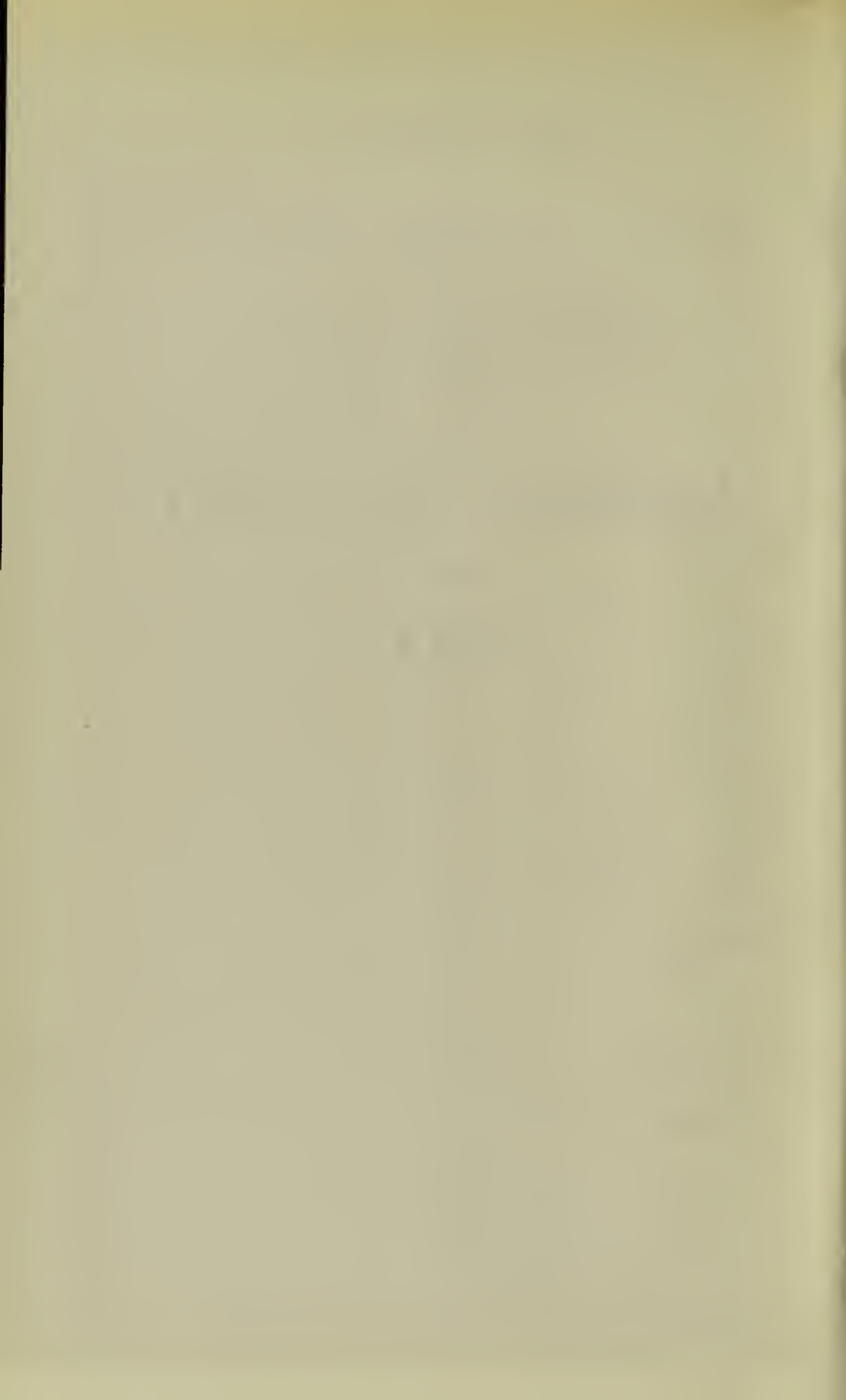
AND

HON. MEDICAL OFFICER NOTTS. CONSUMPTION SANATORIUM.

MANSFIELD:

J. LINNEY, WEST GATE.

1914.



Rural District Council of Blackwell.

Chairman	Mr. T. THOMPSON.
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Vice-Chairman . .	Mr. J. T. TODD.
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Mr. A. SHARDLOW	Pinxton.
Mr. HESKETH	Tibshelf.
Mr. S. C. WARDELL	"
Mr. J. MEIN	South Normanton.
Mr. A. PAGE	" "
Mr. R. REDFEARN	Blackwell.
Mr. J. T. TODD	"
Mr. H. MELLORS	Glapwell.
Mr. J. PEACH	Scarliffe.
Mr. T. THOMPSON	Shirebrook.
Mr. W. H. BURKE	"
Rev. E. H. MULLINS	Langwith.
Mr. G. WHARTON	Ault Hucknall.
Mr. J. WARNER	Pleasley.

To the Chairman and Members
OF
The Blackwell Rural District Council.

GENTLEMEN,

The time has now arrived for submitting for your consideration my Annual Report on the General Sanitary Condition of your District for the year ending December 31st, 1913, this being the twenty-second such report which I have had the honour of preparing since I have acted as your Medical Officer of Health.

I am, Gentlemen,

Yours obediently,

JOHN O. LITTLEWOOD.

TABLE I.

Blackwell Rural District.

Vital Statistics of Whole District during 1913 and previous years.

Year.	Population estimated to middle of each Year.	Births.		Total Deaths Registered in the District.		Transferable Deaths.		Nett Deaths belonging to the District.				
		Nett.		Corrected Number.	Rate.	Number.	Rate.	Under 1 Year of Age.		At all Ages.		
		Number.	Rate.					Number.	Rate per 1,000 Net Births.		Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1908	38434	...	1415	36·8	502	13·0	...	5	212	149·8	507	13·2
1909	39477	...	1466	37·1	467	11·8	...	8	171	116·6	475	12·0
1910	40367	...	1427	35·3	500	12·3	2	36	187	131·0	534	13·2
1911	39644	...	1382	34·8	505	12·7	...	40	220	159·2	545	13·7
1912	40038	...	1323	34·4	469	11·7	4	45	152	114·8	514	12·8
1913	40516	Nil.	1350	33·3	494	12·2	6	32	172	127·4	520	12·8

Total population at all ages 39,319
 Number of inhabited houses 7,366
 Average Number of persons per house 5·3

At Census of 1911.

Area of District in acres (land and inland water) 21,239.

TABLE II.
Blackwell Rural District.
Cases of Infectious Disease notified during the Year 1913.

Notifiable Disease.	Number of Cases Notified.							Total Cases Notified in each Locality. (e.g. Parish or Ward) of the District.								Total Cases removed to Hospital.			
	At Ages-- Years.							Shirebrook	Scarliffie	Pleasley	Tibshelf	Blackwell	Normantn	Pinxtan	A Hucknall		Langwith	Glanwell	
	At all Ages.	Under 1	1 to 5	5 to 15.	15 to 25.	25 to 45	45 to 65												65 & up-wards
Small-pox .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera(c) Plague(p) .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria (including Membranous croup)	43	...	10	30	3	...	...	...	...	5	5	1	1	...	...	1	...	...	6
Erysipelas	26	...	1	1	1	11	9	...	...	7	1	6	1	4	...	...	...	...	...
Scarlet fever	235	1	57	160	14	3	...	...	...	112	46	52	14	9	4	17	2	1	167
Typhus fever .....	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...
Enteric fever	5	...	1	2	...	...	2	...	...	2	...	...	...	...	...	1	...	...	2
Relapsing fever (r) .....	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...
Continued fever (c)	3	...	...	...	1	2	...	...	...	1	...	...	...	1	...	...	...	...	...
Puerperal fever .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-spinal Meningitis	2	...	...	1	...	1	...	...	...	...	1	...	...	...	...	...	...	...	...
Poliomyelitis .....	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pulmonary Tuberculosis	78	...	1	20	13	35	9	...	...	23	6	4	8	7	9	11	4	6	...
Other forms of Tuberculosis	24	...	2	14	4	3	1	...	...	7	3	1	2	2	3	3	2	1	...
Totals	416	1	72	228	33	58	21	3	172	68	17	42	35	23	24	23	11	1	175

Hospitals—Langwith, Mastin Moor, Morton. Sanatoria, &c.—Nil.

TABLE III.

Blackwell Rural District.

Causes of, and Ages at Death, during Year 1913.

Causes of Death.			Nett Deaths at the subjoined ages of "Residents" whether occurring within or without the District.									Contributory Parishes.									
			All ages.	Under 1 year.	1 and under 2	2 and under 5	5 and under 15.	15 & under 25.	25 & under 45.	45 & under 65.	65 & upwards.	Total Deaths whether of "Residents" or "Non-Residents" in Institutions in District.									
												Shirebrook	S. Normanton	Blackwell	Scarliffe	Pinxton	Tibshelf	Pleasley	Ault Hucknall	Langwith	Glapwell
All Causes	{ Certified	...	495	159	48	35	20	20	52	70	91										
	{ Uncertified	...	25	13	...	...	...	2	3	3	4										
Enteric Fever ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Small-pox ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Measles ...	...	...	17	4	5	8	...	...	...	...	...	...	14	...	1	1	1	...	...	...	...
Scarlet Fever ...	...	...	2	...	...	1	1	...	...	...	...	2	...	...	...	...	...	...	...	...	...
Whooping Cough ...	...	...	6	4	2	...	...	...	...	...	...	...	1	...	3	...	...	...	2	...	...
Diphtheria and Croup ...	...	...	6	...	...	4	2	...	...	...	...	3	1	1	...	1	...	...	...	...	...
Influenza ...	...	...	4	...	...	...	...	2	...	2	...	1	1	2	...	...	...	...	...	...	...
Erysipelas ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Phthisis (Pulmonary Tuberculosis)	...	...	25	...	...	1	3	4	14	3	...	6	3	2	6	5	...	...	2	1	...
Tuberculous Meningitis ...	...	...	11	3	3	2	2	1	...	...	...	7	...	...	1	...	1	...	2	...	...
Other Tuberculous Diseases	...	...	19	8	3	2	1	3	2	...	...	11	1	...	1	1	3	2	...	...	...
Cancer, malignant disease ...	...	...	27	...	...	...	...	1	4	14	8	5	4	4	1	4	1	3	4	1	...
Rheumatic Fever ...	...	...	2	...	...	...	...	...	2	...	...	...	...	...	...	...	1	...	1	...	...
Meningitis ...	...	...	9	2	...	3	2	...	2	...	...	...	2	...	3	...	1	2	1	...	...
Organic Heart Disease ...	...	...	46	...	...	...	4	9	14	19	...	6	12	6	5	7	3	3	3	1	...
Bronchitis ...	...	...	31	8	3	1	...	...	8	11	...	8	3	6	1	5	8	...	...	...	...
Pneumonia (all forms) ...	...	...	55	21	12	6	2	5	2	3	4	22	5	7	6	5	8	2	...	...	...
Other diseases of Respiratory organs	...	...	10	...	1	2	1	...	1	1	4	4	1	...	3	...	1	...	...	...	...
Diarrhoea and Enteritis ...	...	...	39	30	9	...	...	...	...	...	...	20	1	1	5	8	2	2	...	...	...
Appendicitis and Typhlitis ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cirrhosis of Liver ...	...	...	1	...	...	...	...	...	1	...	...	...	...	...	...	1	...	...	...	...	...
Alcoholism ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Nephritis and Bright's Disease	...	...	3	...	...	1	...	1	...	1	...	2	...	...	...	...	1	...	...	...	...
Puerperal Fever ...	...	...	2	...	...	...	1	1	...	...	...	1	...	...	1	...	...	...	...	...	...
Other accidents and diseases of	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Pregnancy and Parturition ...	...	...	7	...	...	...	2	5	...	...	...	2	...	1	...	1	3	...	...	...	...
Congenital Debility and Malformation, including Premature Birth	...	...	67	64	3	...	...	...	...	...	...	21	15	4	11	7	1	3	4	1	...
Violent Deaths, excluding Suicide...	...	...	16	1	2	2	2	1	2	5	1	4	5	2	1	2	1	1	...	...	...
Suicide ...	...	...	8	...	...	...	...	5	...	3	...	2	2	1	...	1	1	...	1	...	...
Other Defined Diseases ...	...	...	105	25	5	3	3	...	3	24	42	28	14	11	10	14	17	4	5	2	...
Diseases ill-defined or unknown	...	...	2	2	...	...	...	...	...	...	...	1	...	...	1	...	...	...	...	...	...
Totals	...	...	520	172	48	35	20	22	55	73	95	...	156	84	50	52	70	53	24	25	6
Cerebro-spinal Moningitis ...	...	...	2	...	...	1	...	1	...	...	...	...	...	1	...	1	...	...	...	...	...

TABLE IV.
Blackwell Rural District.

Infant Mortality during the Year 1913.

Nett Deaths from stated causes at various Ages under One Year of Age.

CAUSE OF DEATH				Under 1 Week.	1-2 Weeks.	2-3 Weeks.	3-4 Weeks.	Total under 1 Month.	1-3 Months.	3-6 Months.	6-9 Months.	9-12 Months	Total Deaths under One Year.
All Causes	Certified	...	...	34	7	3	8	52	26	41	20	20	
	Uncertified	...	...	4	2	...	...	6	5	1	1	...	
Small-pox													
Chicken-pox													
Measles											2	2	4
Scarlet Fever													
Whooping Cough							1	1	...	1	1	1	4
Diphtheria and Croup													
Erysipelas													
Tuberculous Meningitis									2	1	...	...	3
Abdominal Tuberculosis									6	...	...	...	6
Other Tuberculous Diseases									1	...	1	...	2
Meningitis (not Tuberculous)									2	...	...	...	2
Convulsions				1	3	2	...	6	6	1	...	3	16
Laryngitis													
Bronchitis							1	1	1	4	1	1	8
Pneumonia (all forms) ... ..								...	4	7	4	6	21
Diarrhoea ... ..								...	6	2	3	...	11
Enteritis							2	2	9	4	3	1	19
Gastritis							1	1	1	2	2	...	6
Syphilis													
Rickets													
Suffocation, overlaying					1	...	...	1	...	...	...	...	1
Injury at Birth													
Atelectasis				1	...	...	...	1	...	...	...	...	1
Congenital Malformations... ..				7	1	...	...	8	1	3	2	1	15
Premature Birth				27	4	1	1	33	2	...	...	...	35
Atrophy, Debility and Marasmus... ..				2	...	...	2	4	4	4	2	...	14
Other Causes... ..				...	...	...	...	...	1	1	1	1	4
Total ...				38	9	3	8	58	31	42	21	20	172

Nett Births in { legitimate 1288.
the year { illegitimate 62.

Nett Deaths in { legitimate infants 158.
the year { illegitimate infants 14.

ADOPTIVE ACTS IN FORCE.

1. At a Meeting of the Mansfield Rural Sanitary Authority, held on the 7th November, 1899, a Resolution was passed adopting the Infectious Disease (Notification) Act, 1889 (52 and 53 Vict., c., 34), within their district.
2. At a meeting of the Council, held on the 7th January, 1897, a Resolution was passed adopting the Infectious Disease (Prevention) Act, 1890 (53 and 54 Vict., c 34), within their district.
3. At a meeting of the Council, held on 22nd June, 1899, a Resolution was passed adopting Part 3 of the Public Health Acts Amendment Act, 1890, so far as it is applicable to Rural Districts.

REGULATIONS AND BYE-LAWS IN FORCE.

1. 23rd Sept., 1879—Bye-laws were made for the whole district with respect to Common Lodging-houses, and Cleansing of Footways and Pavements, the Removal of House Refuse, and the Cleansing of Earth Closets, Privies, Ashpits, and Cesspools.
2. 16th Feb., 1888—Regulations were made for the whole district under the Contagious Diseases (Animals) Act, 1886, and the Dairies, Cowsheds, and Milkshops Order of 1885.
3. 17th Jan., 1889—Regulations were made under the Allotments Acts for the Parish of Blackwell.
4. 16th June, 1892—New Scale of Charges and Regulations were made for preventing waste, misuse, and undue consumption or contamination of the water supply.

5. 19th May, 1896—New Bye-laws were made for the whole district with respect to New Streets and Buildings, and Nuisances.
6. 24th October, 1907—Bye-laws were made for the whole district with respect to Slaughter-houses.
7. 12th March, 1908—The scale of charges and Regulations made on the 16th June, 1892, for preventing waste, misuse, and undue consumption or contamination of the water supply was rescinded as from 25th March, 1908, and a new Scale adopted and ordered to take effect in substitution thereof from such date.
8. 7th August, 1908—Bye-laws were made for the whole District with respect to Tents, Vans, Sheds, and similar structures used for human habitation.
9. 16th December, 1909—Regulations were made for the whole District with respect to Dairies, Cowsheds, and Milkshops.

Physical Features of the District.

A description of some of the chief physical features of a district must necessarily include some reference to its geological structure. Such an account may be an advantage to some, and cannot fail to interest all the members of the Council. To the geologist and antiquarian the county of Derby abounds in many treasures, but it is not to such treasures that I now wish specially to draw your attention.

The portion of the county in which you are more particularly interested is placed in the east, and forms a part of the Pennine chain, or back-bone of England. There are no hills of any great height, but the surface presents a somewhat irregular contour, very different from that found in the north-west, where high hills, deep ravines, and extensive dales are characteristic features. This great central or Pennine anticline throws off on the west the coal measures of Lancashire and North Staffordshire, and on the east the great coalfields of Yorkshire and Derbyshire.

For convenience of description the district may be divided into two parts, viz. : north and south. The southern part embraces the parishes of Pinxton, South Normanton, Blackwell, and Tibshelf, which are situated on the upper coal measures.

The depth at which coal is found varies in different parts. At Blackwell it appears on the surface, whilst in some of the adjacent parishes it is only found at considerable depths. As water-bearing strata, the upper coal measures are not satisfactory, the subsoil being too loose and shaly, and thus readily allowing of the free percolation of water. It is found that the range of rise and fall in some of the superficial wells exceeds many feet. The soil is heavy and loamy, and contains a large amount of moisture.

Passing on to the northern part of the district, which includes the parishes of Ault Hucknall, Glapwell, Scarccliffe, Langwith, and Pleasley (including Shirebrook) we meet with the magnesian limestone as well as the coal measures. Portions of Ault Hucknall, Glapwell, and Scarccliffe are over-lapped by the former. It is quite obvious where one formation ends and the other begins: the line of demarcation is well marked by the escarpment which runs north and south, and is particularly well-defined by the ridge which runs through Hardwick Park and skirts the hamlet of Palterton. Along the base of this escarpment numerous springs abound, and it is from these sources that Ault Hucknall (Doe Lea) derives its water supply.

The surface overlying the magnesian limestone differs from that of the coal measures in being more undulating in character. The subsoil is firmer, and the range of rise and fall in the wells is considerably less. The soil is drier, more sandy, and lighter in composition.

General Vital Statistics of the District.

Area and Population.

There has not been any alteration in the area of the District during the year.

I had hoped to have been able to place before you certain details arising out of the last Census Returns, but, unfortunately, they are not yet to hand. The cause of this delay is best known to the authorities, who may have some satisfactory explanation, but it does appear somewhat absurd that valuable information should be so long withheld.

The method adopted of estimating the population in a District like the one we are considering is based on the number of occupied houses in each parish, after having first ascertained the average number of persons living in each house. This plan is the only one capable of furnishing anything like a true estimation.

The character of the population has somewhat changed since I was first appointed Medical Officer of Health. During the last twenty years the mining element has very considerably increased, this being due to the development of coal in certain parts, particularly the northern parishes.

The type of house, which is built of brick, has nothing particularly characteristic, beyond the fact that, in many instances, the jerry-builder appears to have had a rather good time. Each

house generally consists of two rooms on the ground floor, with a very small scullery, containing a copper. Generally there are three bedrooms, one being an attic. The sanitary conveniences consist of privy middens and pail closets, the latter largely predominating. A few water closets are found in some of the more modern dwellings, and I am pleased to be able to report that there is a tendency to increase the number.

In the past, the houses, in my opinion, have been too closely aggregated together in large blocks, this having a tendency to limit a free circulation of air in all directions. The spread of infectious diseases in a densely populated community is decidedly greater than where more air space is given. This applies in every instance, but more particularly in cases of phthisis.

Back-to-back houses are getting very few, the adoption of the Housing and Town Planning Act having had the effect of considerably lessening their number.

The actual area and population of the District are as follows:—

Area in acres.	Population.	Persons per acre.
21,239.	40,516.	0·52.

The total number of newly-erected houses in the District during the year was 83, as against 80 for the previous twelve months. In my report of last year I made the remark that in all probability the development of house property had reached a maximum, but my observations were evidently too premature, as there are now signs of considerable expansion in certain parts of the District, particularly near Langwith Junction and at Shirebrook.

There are other parts of the District where houses are also badly needed.

Coal mining and agriculture form the chief occupations of the District.

The only disease arising through the former occupation is Miners' Nystagmus, which, in my opinion, is far more prevalent than is usually thought. It varies considerably in degree, and may exist to a marked extent without absolutely incapacitating the person involved.

The amount of Poor Law relief (outdoor) during the year reached a sum of £2,109.

There are no gratuitous medical or surgical hospitals in the District, but there are hospitals in Nottingham, Sheffield, Chesterfield, and Mansfield, where large numbers of adults and children attend regularly.

The Ransom Sanatorium, which is situated in Mansfield, in the County of Nottingham, affords accommodation for 32 phthisical cases.

The following figures serve to show to what extent the population has increased during the last 50 years, according to Census Returns:—

Census.					
1861.	1871.	1881.	1891.	1901.	1911.
6,685	7,947	12,746	16,858	28,735	39,319

The houses have likewise increased in the following proportion:—

1861.	1871.	1881.	1891.	1901.	1911.	1913.
1,302	1,575	2,410	3,077	5,514	7,412	7,593

Table showing Acreage, Inhabited Houses, Population, Births and Deaths of each Parish of the District,
For the Year ending December 31st, 1913.

PARISHES.	Acres.	In- habited Houses.	Popu- lation.	Births	Deaths.	Deaths under 1 Year.
Blackwell ..	1739	Awaiting Census Returns, 1911.	4862	141	49	10
Normanton ..	1934		6729	241	81	24
Pinxton ..	1253		5443	176	69	25
Tibshelf ..	2371		4171	105	53	8
Pleasley ..	*1788		2322	75	24	5
Shirebrook ..	*1505		11364	445	153	69
Scarliffe ..	3954		2717	99	52	22
Ault-Hucknall ..	4429		2056	51	25	8
Langwith ..	1492		720	13	5	1
Glappwell ..	774		132	4	0	0
		*7593	*40516	1350	511	172

* Estimated.

Table showing the Number of New Houses Erected Annually
since 1899.

Parishes.	1899	1900	1901	1902	1903	1904	1905	1906	1907	1908	1909	1910	1911	1912	1913
Blackwell	4	11	16	27	17	10	6	2	6	21	12	22	13	11	12
Normanton	23	15	16	66	42	37	32	5	7	20	40	23	17	30	32
Tibshelf ..	10	8	18	37	34	10	20	3	3	3	2	17	16	13	12
Pinxton ..	4	2	123	55	32	100	99	6	11	21	19	25	6	25	15
Pleasley ..	13	26	9	0	0	2	1	0	0	30	50	36	0	0	0
Shirebrook	148	169	167	151	135	47	24	80	130	92	57	36	0	8	4
Scarliffe ..	31	33	23	6	1	0	3	0	1	2	6	6	13	6	0
A Hucknall	0	1	1	1	47	1	0	0	0	44	1	0	1	0	0
Langwith	0	0	5	0	48	0	0	0	2	1	4	0	0	2	8
Glappwell ..	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
Total . . .	233	265	378	343	356	207	185	96	160	235	191	165	66	95	83

Births and Birth=Rate.

The number of births registered during the year was 1,350, as against 1,323 for the previous year. The birth-rate was equal to 33.3 per 1,000 of population. On reviewing previous statistics it is found that the birth-rate has been gradually declining for a number of years past. The only explanation I am able to suggest is that as new coalfields are being developed in other parts of the Midland Counties, young and unmarried men take the opportunity of seeking employment there, where work is plentiful and wages high.

The neighbourhood of Doncaster, and the towns of Mansfield and Mansfield Woodhouse are rapidly increasing in size, due entirely to the development of coal.

The rate for England and Wales was 23.9 per 1,000 of population.

Deaths and Death=Rate.

There were 494 deaths at all ages registered in the District, and 23 deaths of residents not registered in the district but belonging to the district, making a total of 520, as compared with 514 for the previous year.

All deaths of non-residents registered in the District have not been included. The general death-rate for the year was 12.8 per 1,000 of population, and that for England and Wales was 13.7.

It must be borne in mind that although the District is designated rural, urban conditions largely prevail.

Regarding deaths due to diseases of special interest, Tables III. and IV. will tell their own story.

Infantile Mortality.

During the year 172 deaths occurred in children under one year of age, as against 152 for the year previous; hence the higher rate for the period under consideration. The Infantile death-rate for the year was 127.4 per 1,000 births.

The year 1912 was conspicuous in having a rate of only 114.8. At one time this rate used to exceed 200 in your District.

The factors at work tending to increase infant mortality are numerous—overcrowding, insanitary surroundings, improper feeding, and the dosing of children with anodynes for the purpose of keeping them quiet are perhaps some of the more common.

A good start in life is of the utmost importance.

On perusing Table IV. it will be observed that no less than 33 infants perished before reaching the age of one month, due to prematurity of birth. It would be interesting to know how many out of that total died as the result of maternal practices now so common amongst the women of the working classes.

As the result of Diarrhœa and Enteritis, 30 children died, and here again ignorance plays a most important part. It is not reasonable to expect children to thrive unless they are properly fed. So long as they are kept at the breast (if not too long) all goes fairly well, but the moment artificial feeding commences dyspeptic troubles begin and the child wastes, this being due to the absorption of substances known as toxins, resulting from the decomposition of food substances. An anxious mother will have her child weighed from time to time in order to see if it is gaining in weight proportionately with its age; if not, she will seek medical advice, which generally results in some readjustment in its dietary.

The Notification of Births Act gives Local Authorities power to appoint nurses whose duty it is to visit parturient women, to instruct them in the way the young child should be fed and cared for, and to advise them generally on matters that many mothers are so much in need of knowledge.

Below will be found a list of contributory parishes, with a population exceeding 3,000, showing the infantile death-rate in each:—

FIVE YEARS.

	1908.	1909.	1910.	1911.	1912.	1913.
Blackwell... ..	73.8	97.5	48.6	115.4	94.0	70.9
Normanton	188.9	97.8	136.5	135.2	124.3	99.5
Pinxton	158.2	94.1	132.9	191.6	73.4	142.0
Tibshelf	140.0	89.5	115.3	54.2	119.2	76.19
Shirebrook	172.9	158.8	186.4	191.3	126.7	155.0
Scarcliffe... ..	106.1	99.0	120.9	121.0	153.0	222.2

A perusal of the above data shows that Shirebrook has remained consistently high for a number of years past, but the precise cause is difficult to ascertain.

As regards the character of the various parishes, Shirebrook is distinctly the most urban, and there are certain localities in it where conditions adverse to child life prevail, overcrowding being probably the most conspicuous. The visiting of picture palaces and other places of amusement by women with young babies, who ought to be in bed at home, is not calculated to promote healthy growth and development.

Zymotic Diseases and Rates of Mortality.

Speaking generally, there are three diseases, viz., Summer Diarrhœa, Measles and Whooping Cough, the deaths from which control largely the degree of severity in the death-rate from this class of maladies. Epidemic Diarrhœa is subject to seasonable variations, for during certain years the complaint becomes very prevalent, with a high rate of mortality.

During other years the prevalence is comparatively mild, causing few deaths. Measles and Whooping Cough not infrequently occur concurrently, and run a rather different course; at times they become extremely epidemic. If the outbreaks occur during the winter and early spring, when the weather is cold and inclement, complications such as Pneumonia and Bronchitis are very likely to occur, which often prove fatal, particularly amongst weak and badly nourished subjects.

The number of deaths attributed to the seven principal Zymotic Diseases during the year amounted to 70, and the death-rate was 1.7 per 1,000 of population, which is slightly below the average for the 10 preceding years.

Zymotic Death-rate per 1,000 of population for the parishes having a population of over 4,000:—

				1912.	1913.
Whole District	...	...	...	1.9	1.7
Shirebrook	...	...	...	4.2	2.2
Normanton	...	...	...	0.6	2.3
Pinxton	...	...	...	1.1	2.3
Blackwell	...	...	...	0.2	0.6
Tibshelf	...	...	...	2.4	0.7

Deaths from the seven principal Zymotic Diseases.

			Rates of mortality.	
		Number.	per 1000 of popn.	
1892	...	55	...	3.1
1893	...	41	...	2.2
1894	...	35	...	1.8
1895	...	48	...	2.5
1896	...	93	...	4.3
1897	...	64	...	2.8
1898	...	62	...	2.5
1899	...	122	...	4.7
1900	...	102	...	3.7
1901	...	99	...	3.4
1902	...	63	...	1.9
1903	...	62	...	1.8
1904	...	61	...	1.75
1905	...	66	...	1.85
*1906	...	49	...	1.30
1907	...	97	...	2.6
1908	...	66	...	1.7
1909	...	65	...	1.6
1910	...	71	...	1.78
1911	...	109	...	2.75
1912	...	79	...	1.9
1913	...	70	...	1.7

* The lowest recorded for the last 15 years.

Vital Statistics of the Contributory Parishes comprised in the Blackwell Rural District for 1913.

[illegible]

Table showing the Number of Cases Notified and Deaths from the principal Zymotic Diseases
for the Year 1913, and ten preceding years.

DISEASES.	1913		1912		1911		1910		1909		1908		1907		1906		1905		1904		1903	
	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths	Cases	Deaths
Notifiable.	Small Pox ...	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0	21	3	5	0
	Scarlet Fever ...	235	2	3	288	5	220	4	83	47	132	1	211	4	272	6	119	4	124	3	81	0
	Diphtheria ...	43	6	75	3	86	9	22	5	9	16	2	40	7	42	6	19	1	48	3	177	12
	Erysipelas ...	26	0	26	1	35	0	34	0	20	31	0	36	2	50	1	36	1	37	0	54	1
	Puerperal Fever ...	3	2	3	2	2	0	0	10	1	1	0	3	0	7	5	5	0	2	0	5	2
	Typhoid Fever ...	5	0	19	5	30	2	25	2	54	7	18	3	21	1	63	6	29	4	32	1	
	Cerebro spinal Meningitis ...	2	2																			
	Phthisis ...	78	25	61	26																	
	Other Tubercular Diseases ...	24	30																			
	Poliomyelitis ...	0	0																			
Non-Notifiable.	Diarrhoea ...	39	14	73	16	15	16	15	15	15	37	15	15	34	22	16	34	16	16	16	27	
	Measles...	17	45	8	20	23	20	23	23	23	13	40	40	16	4	14	9	14	14	11	11	
	Whooping Cough ...	6	1	11	24	5	24	5	5	5	10	30	30	9	5	11	9	11	11	11	11	
	Influenza ...	4	8	4	3	3	3	3	3	3	4	4	4	5	3	4	5	4	4	4	3	

The Infectious Diseases (Notification) Act was adopted at a meeting of the Council, held on the 7th November, 1889, but did not come into operation until January 1st, 1890. Since this date three Orders have been made by the Local Government Board making Phthisis, Cerebro-Spinal Fever, Acute Poliomyelitis, and Tubercular Diseases other than Phthisis notifiable. This will obviously increase the cost of the notification of infectious diseases.

The cost of administering this Act and additional Orders in each complete year since its adoption was as follows:—

Year.	Cases Notified.		£	s.	d.
1890	...	276	...	38	5 0
1891	...	272	...	38	15 0
1892	...	135	...	16	12 6
1893	...	324	...	39	10 0
1894	...	116	...	18	15 0
1895	...	92	...	11	12 6
1896	...	314	...	38	10 0
1897	...	268	...	30	7 6
1898	...	334	...	41	5 0
1899	...	382	...	47	0 0
1900	...	363	...	44	10 0
1901	...	306	...	37	17 6
1902	...	260	...	32	10 0
1903	...	354	...	44	5 0
1904	...	261	...	32	12 6
1905	...	232	...	29	0 0
1906	...	434	...	54	5 0
1907	...	313	...	39	2 6
1908	...	198	...	24	15 0
1909	...	214	...	26	15 0
1910	...	328	...	41	0 0
1911	...	441	...	55	2 6
1912	...	420	...	52	10 0
1913	...	416	...	52	0 0
				<hr/> £896 17 6 <hr/>	

Form filled in in every case of Infectious Disease notified.

[illegible]

PRECAUTIONS ADOPTED.

Patient removed to Hospital...	...	...	...	...	...	...	...	...
Schoolmaster written to	...	...	...	...	...	...	...	...
Date of Disinfection	...	...	...	...	...	...	...	...
School Closed	...	...	...	...	...	...	...	...
Termination	{	Date of Recovery	...	...	...	...	...	...
of case.		Date of Death...	...	...	...	...	...	...

.....Inspector.

* If from well, note depth, and nearest possible source of pollution

Isolation Hospitals.

The hospitals available for the isolation of infectious cases are at Langwith, Morton, Mastin Moor, and Penmoor. The number of cases removed to hospital was 175, as against 145 for the previous year, thus working out at a cost of £466 7s. 9d., and equal to £2 13s. 3d. per case.

A district well equipped for the isolation of infectious cases by means of hospital treatment is undoubtedly of considerable value, especially for reducing the mortality of the particular disease involved; but there is still need of some better system of securing the early recognition of infectious diseases than that now prevailing. How this is to be obtained is a matter demanding the consideration of those especially interested in public health administration.

The difficulty of arriving at an early diagnosis is greatly increased by the fact that some cases are so mild as to escape recognition by those with whom they are in constant contact. It has been my experience in numerous cases of infectious disease for a diagnosis not to have been made until the patient has actually been convalescent, so mild were the symptoms that the person infected appeared to be practically in good health.

I am of the opinion that where it can be ascertained that the inmates of a house are protected by having had the disease that it is of little use to go to the expense and inconvenience of the removal of a fresh case. This, I must admit, applies more particularly to a disease like Scarlet Fever.

It is worth while removing every case of Typhoid Fever for the special benefit that hospital treatment affords, whilst at the same time we are able to keep under direct control the source of infection by which the disease is spread.

Scarlet Fever.

It is rather an extraordinary coincidence that the figures 235, which represent the number of cases notified during the year, should correspond with the total notified during 1912. The mortality, which was only two, was even lower than the record for the previous year, which was three. Taking the two years together, which give a total of 470 cases, only five deaths occurred.

The following data are given to show the parishes involved, the number of deaths in each parish, and the rates of special interest:—

Parishes.	Population	Cases.	Deaths.	Case rate per 1000 of Population	Case Mortality per cent	Nos. re- moved to Hospital
Blackwell... ..	4862	14	0	2.8	0	9
Pinxton	5443	4	0	.7	0	10
South Normanton ...	6729	9	0	1.3	0	5
Tibshelf	4171	25	0	6.0	0	17
Shirebrook	11364	112	2	9.1	1.82	80
Pleasley	2322	5	0	2.1	0	1
Scarcliffe	2717	46	0	1.6	0	32
Ault Hucknall	2056	17	0	8.2	0	13
Upper Langwith ...	720	2	0	2.8	0	—
Glapwell	130	1	0	7.5	0	—

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It will be observed from the above particulars that the brunt of the disease occurred in the parishes of Shirebrook, Scarcliffe, and Tibshelf, most of the southern parishes faring much better. The type of the outbreak was decidedly mild, the case mortality per cent. only reaching 0.85 for the entire district, whilst the case-rate per 1,000 of population was 5.8. The number of houses involved was 173.

Complete disinfection of the invaded houses was carried out, the infected linen being boiled, and the bedding and other substances subjected to high pressure steam disinfection.

To facilitate prompt removal to hospital, the Inspectors of Nuisances are notified by the medical men of the district, simultaneously with the Medical Officer of Health.

Speaking generally, no difficulty is experienced in securing the consent of the parents for removal. From knowledge gained by experience, I can say the patients during their period of isolation have a right royal time, and thoroughly enjoy the change.

Unfortunately we have had some return cases, but I cannot see how that can occasionally be avoided, as we have no means at our disposal, by bacteriological investigation, of ascertaining when the disease has become non-infective. Probably within the near future a vaccine will be discovered capable of producing immunity, such as now occurs in some of the infectious diseases.

Diphtheria.

The prevalence of Diphtheria throughout England and Wales appears to have been on the increase for some years. How far this is real I am unable to say, but from many years' experience I am a little doubtful if such increase has actually taken place.

The facilities afforded to the general practitioner for confirming his diagnosis by bacteriological examination have become so general, that numerous cases in the past which were regarded as catarrhal or septic in character are now found to be due to Diphtheria. Many County Councils and large Borough Councils throughout the country have established laboratories for the purpose of examining, bacteriologically, swabs taken from the throats of suspected persons, free of cost. Until such a diagnosis has been made it is quite impossible in numerous cases to give a decided opinion.

By such methods of procedure one can decide, with a fair degree of certainty, when the case is really free from infection. Thanks to the injection of antitoxic-serum, the case mortality per cent. has fallen to about 10 throughout the country.

During the period under review 43 cases were notified, 40 of which occurred in children and young persons under 15 years of age. The number of deaths recorded was six.

The parishes involved were as follows:—Shirebrook, 20; Scarcliffe, 5; Pleasley, 5; Tibshelf, 1; Blackwell, 11; Langwith, 1. During the previous year 75 cases were notified.

Most of the medical men practising in the District take advantage of the offer of the Council to supply for use, free of cost, Diphtheretic Antitoxin, both for curative and prophylactic purposes. Every case was carefully investigated as to source of infection, but in no single instance could the origin be satisfactorily traced. Judging from past experience, school attendance is the common source through which the disease is spread. One of the most extraordinary features about Diphtheria is the fact that children may have the disease in their air passages without producing any obvious symptoms. During an outbreak in a school I once found quite a large percentage of children present with the disease in their throats without producing the slightest outward indication.

The following particulars are given for comparison between the years 1912 and 1913:—

Year.	Cases.	Deaths	Case Mortality per cent.	Death rate per 1000 of Population.	Case rate per 1000 of Population.
1913... ..	43	6	13.7	.14	1.06
1912... ..	75	3	4	.07	1.87

The infected houses were systematically disinfected, and the bedding and clothing subjected to steam disinfection.

Diarrhœa and Enteritis.

For several years past I have adopted the plan of dealing with these diseases under one heading, viz., that of Summer Diarrhœa.

Clinical experience points to the conclusion that Enteritis and Epidemic Diarrhœa, occurring in children under two years of age, are one and the same disease.

Under the headings of infantile mortality and zymotic death-rate, I have already referred to the influence which these diseases play in swelling the rates of mortality.

I do not think I can do better than introduce a letter issued by the Local Government Board in August, 1911, on the prevalence of Diarrhœa amongst young children. It ran as follows:—

“The Local Government Board have had under their consideration the excessive child mortality, especially from diarrhœa and enteritis, which is accompanying the very hot and dry summer of the present year. They realise that some excess of mortality over that occurring in cool and wet summers is inevitable; but they desire to impress upon the Council the importance of taking such special steps as are practicable with a view to minimising the excess.

“The Board are aware that in a large number of sanitary districts special efforts are made each summer to remove the nuisances and other conditions which favour excessive mortality amongst children. They suggest the following lines along which it is most important that action should be taken, but they do not wish it to be understood that this advice covers the entire ground or that it does not need to be supplemented by action directed towards the special needs of individual districts.

“Firstly, it is important that exact advice should be given as to the feeding and management of children, and more generally as to preventing the exposure of their food to contamination from de-

composing organic matter. The distribution of clearly worded leaflets is useful in this connection; but even more important are personal visits and the offer of practical advice to the mothers of babies born within the last twelve months. Exact and simple instructions are most likely to be followed if given during a period of special danger. In districts and towns in which the Notification of Births Act has been adopted, the records obtained under that Act will give valuable information in selecting the homes to which visits are now most urgently required.

“Secondly, the full value of the personal instructions indicated above cannot be realised unless vigorous efforts are made to prevent the accumulation in or in the vicinity of the house of decomposing animal and vegetable matter. It is not necessary to do more than mention the importance of efficient scavenging, of frequent and, if practicable, daily removal of house and stable refuse, of domestic cleanliness, and of keeping all food properly protected. The Council may consider it advisable during the next few weeks to divert the sanitary inspectors from less urgent work, and to instruct them to make rapid visits with a view to securing efficient sanitation, especially in and about the houses of the working classes.

“Thirdly, it is important that the Council should promptly ascertain in which parts of their district diarrhœa is especially prevalent, and should devote close attention to street and court scavenging and to the removal of stable and domestic refuse in these areas. Without waiting for the weekly death returns, efforts should be made to obtain information of cases of diarrhœa from health visitors and others who make domestic visits; and to impress upon parents the importance of immediate treatment of infantile diarrhœa. Apart from the medical notification of cases of epidemic diarrhœa in children, the visits of health visitors can be utilised for impressing upon parents the seriousness of diarrhœa amongst young children and the desirability of information being given to the Medical Officer of Health should a case of diarrhœa occur.”

In addition to the preventative measures already spoken of under Infantile Mortality, mention may be made of the great importance of the special cleansing of courts and alleys, more efficient street and privy scavenging, the abolition of privy middens, and the removal of accumulations of decomposing materials in the backyards of houses, stables, and other out-dwellings.

	1913.	1912.
Deaths under 2 years of age	39	12
Deaths in children under 1 year	30	9
Average number of deaths, 10 preceding years	26.9	28.1
Death-rate per 1,000 of population ... ..	.96	.35
Deaths under 1 year per 1,000 population ...	22.2	6.8

Typhoid Fever.

The year 1913 was remarkable for having only five cases of enteric fever, and there is reason to believe that even that number was too large, as the bacteriological examination of the blood only showed one with a positive reaction.

The cases were distributed over four parishes—Shirebrook (2), Normanton, Pinxton, and Langwith (one each). Two cases were removed to one of the Isolation Hospitals.

During the previous year only 19 cases were notified as occurring in 13 houses. The mortality was nil.

To quote Dr. Newsholme, Medical Officer of Health to the Local Government Board, in his report for 1911-12, the Council has every reason to be satisfied with the sanitary administration of the District. He states:—"Probably no better test exists of the efficiency of the sanitary administration of a given district, and of the districts from which it receives its food supplies, than the degree of prevalence of enteric fever."

Measles.

The number of deaths attributed to this disease during the year was 17, as against 45 for the year previous. Judging from information obtained from the various school officials in the district, the disease appeared to have assumed an epidemic character, particularly in the parishes of Normanton and Shirebrook. Unfortunately, owing to the explosive character of the disease, its presence cannot be ascertained until it is too prevalent to allow of the ordinary early precautions against its spread to come into effective operation.

Regarding the deaths which took place, it was found that they all occurred in children under five years of age, nine being in children under two years of age.

Although the mortality from Measles amongst the working classes is very high, that is not the only factor which requires consideration.

The after results of the disease may be of a very damaging character. Deafness not infrequently occurs, the impression made on the lung tissue may lay the foundation for the growth of tuberculosis, as well as calling into activity diseases which otherwise might have remained permanently latent. Few of the houses of the working classes as they now exist allow of satisfactory isolation. I am of the opinion that if some inexpensive home could be erected in each parish where children suffering from Measles and Whooping Cough could be received and treated properly, the mortality could be very considerably reduced. Most medical men know that medicines in many of these cases are absolutely useless, but good nursing, suitable feeding, and healthy surroundings are of paramount importance.

Whooping Cough.

Regarding the spread and effects of this disease on the general health of children, I have nothing to add to what I have stated with respect to Measles. The mortality of Whooping Cough was at the rate of 0.14 per 1,000 living, which is 0.074 below that for 1912.

Phthisis and Other Tubercular Diseases.

	1913.	1912.	1911.	1910.	1909.	1908.
No. of deaths from Phthisis ...	25	26	27	25	22	24
No. of deaths from other Tubercular Diseases ...	30	25	41	32	20	34
Death-rate of Phthisis per 1,000 living ...	0.61	0.64	0.68	0.62	0.55	0.62
Death-rate of Phthisis and other Tubercular Diseases combined ...	1.35	1.27	1.70	1.41	1.06	1.50

The death-rate from Consumption, .61 per 1,000 living, is practically identical with the average for the five preceding years, which compares very favourably with other rural districts of the country.

The number of cases of Phthisis notified was 78, as against 61 for 1912. The examination of school children and the establishment of tuberculosis dispensaries in various parts of the county will, in all probability, account for the increase, particularly amongst young children. It is very probable that the future will witness even a much larger proportion of notifications from this disease. The marked attention which is given to the physical examination of the chests of school children is certain to result in the

detection of phthisis in its earlier stage. In the past there is no doubt that many cases have been allowed to drift on undetected until they have arrived at a stage when remedial measures are practically hopeless. What we are all looking forward to and aiming at is the detection of the disease in its very infancy before destructive changes have taken place in the lungs, and the nutrition of the system has been materially affected. When this can be accomplished there is a very fair chance of arresting the disease, if only a suitable environment can be found where the child can have an ample supply of fresh air, abundance of good and suitable food, and adequate protection to the body by suitable clothing.

Consumption is only one form of tuberculosis. There are numerous other varieties, such, for instance, as Brain Fever (Meningitis), wasting of the bowels, and bone disease. On the 1st of February last all kinds of tuberculosis became compulsorily notifiable, and this measure brought to light 24 cases, all of which have been visited and records taken of their condition and surroundings by the nurse specially appointed to do that work. When the cases have called for special consideration they have been visited by the Medical Officer of Health himself.

Regarding the cases of phthisis, a very careful investigation has been made on every occasion, not alone by the Tuberculosis Nurse, but by the Inspectors of Nuisances and the Medical Officer of Health in a very large proportion of the cases. As far as possible defective homes have been improved, better ventilation provided, and overcrowding remedied. In some instances shelters have been provided by the County Council, spittoons provided for the reception of infected sputum, and arrangements made for treatment at the nearest Dispensary. In carrying all this out a very considerable amount of work has been thrown on the officers of the Council, administrative and otherwise. The work of dealing with Consumption is only just commencing, and the day is not far off when provision will be made for the isolation of all cases of phthisis in suitably situated sanatoria.

Already there are quite a number of Dispensaries, in charge of specially chosen medical men, where the latest forms of treatment can be obtained free of cost.

The routine examination of all contacts from time to time in an infected house is a procedure gaining ground, for it offers advantages for obtaining early information of fresh cases of consumption. It should never be lost sight of that, although phthisis in itself is not hereditary, a predisposition to the disease is so. Why some persons are more immune to the disease than others is difficult to say, but undoubtedly such a condition does exist.

The remedial measures I have already spoken of are excellent in character, but there are other steps which need to be considered. The milk supply in this country is very unsatisfactory, for it is a well-established fact that large quantities of milk, containing the tubercle bacilli, are distributed wholesale, and tuberculous meat is still exposed for sale in our markets. The petty fines inflicted by many Justices of the Peace when a conviction has been established only encourages unscrupulous men to persist in their ungodly traffic. Such persons can well afford to pay a nominal fine and even then be in pocket.

We have been promised a new Milk Bill for some time, but owing to the congested condition of legislation in the House of Commons this important measure has had to be shelved. There is, however, some hope that within the near future a Bill will become law. One of the chief clauses is sure to embody a provision for a thorough veterinary examination of all milch cows, and it should give powers for the destruction of all cattle found to be in an advanced stage of tuberculosis.

Fortunately the public are beginning to realise the danger of expectorating in public places. The universal adoption of bye-laws for the control of spitting indiscriminately might with advantage be put into general practice.

During the year 78 cases of Pulmonary Tuberculosis were notified.

The following particulars as to locality, sex, age, rental of dwelling, and occupation may afford information of some value and interest:—

Parish.	Sex.		Ages.				Rental.
	M.	F.	1-10	10-20	20-50	50 & up	
Shirebrook... ..	12	11	2	5	15	1	5/0—6/6
Blackwell	5	2	...	...	6	1	3/9—6/9
Tibshelf	5	3	...	2	6	...	
Pleasley	1	3	2	...	2	...	4/9—5/6
South Normanton... ..	6	3	2	2	5	...	
Pinxton	7	4	2	3	6	...	3/2—5/8
Scarcliffe	4	2	3	1	2	...	5/0—5/6
Ault Hucknall... ..	3	1	...	1	3	...	4/6—6/0
Upper Langwith	2	4	...	...	6	...	4/6—6/6
Total...	45	33	11	14	51	2	

THE OCCUPATIONS OF THE MALES AND FEMALES:—

Males.	Coal Mining	20	Females.	Dressmakers.....	3
	Railway Employees	6		Certified Midwife	1
	Tradesmen	2		Domestic Servants	5
	Dairyman	1		Wives of Miners	10
	Joiner	1		Wives of Railway Employees..	3
	Stoker	1	Male and Female.	Children of Miners....	22
	Pit Boy	2		Child of Labourer	1

The 78 cases notified represent a case mortality per cent. of 37.0, the case rate per 1,000 being 1.9, as against 1.5 for 1912.

Regarding occupation, relatively, there is not much to choose, as the number of coal miners in the district, in proportion to other occupations, is very high.

PARISH.	1913		1912		1911		1910		1909		1908	
	Phthisis.	Other Tubercular Diseases.	Phthisis.	Other Tubercular Diseases.	Phthisis.	Other Tubercular Diseases.	Phthisis.	Other Tubercular Diseases.	Phthisis.	Other Tubercular Diseases.	Phthisis.	Other Tubercular Diseases.
Blackwell... ..	7	2	3	0	2	3	1	0	1	0	0	1
Normanton	9	3	8	0	3	2	5	3	4	2	7	6
Pinxton	11	3	4	1	4	1	6	4	1	1	1	2
Tibshelf	8	2	2	1	1	2	0	2	2	3	1	2
Shirebrook	23	7	8	17	11	20	8	17	8	8	9	15
Pleasley	3	1	0	2	1	4	0	2	1	0	2	0
Scarliffe... ..	6	3	1	2	3	6	0	3	4	2	2	4
Ault Hucknall	5	2	0	1	2	2	4	1	1	3	2	3
Langwith... ..	6	1	0	1	0	1	1	0	0	1	0	1
Glapwell... ..	0	0	0	0	0	0	0	0	0	0	0	0
	78	24	26	25	27	31	25	32	22	20	24	34

Instructions to Consumptives.

Your three chief wants are FRESH AIR, REST, and GOOD FOOD.

1. FRESH AIR.—You cannot have too much fresh air, and should try to spend at least eight hours a day out of doors.

When indoors, keep the bed and sitting rooms as nearly like the outside air as possible, by keeping the windows wide open. Never sleep with the windows shut, however cold may be the

weather. A draught is much less dangerous than a stuffy room; indeed, some draught or current of air is necessary to good ventilation. Avoid all crowded rooms, such as theatres, concerts, and public meetings.

2. **REST.**—One great danger to persons with, or recovering from, consumption, is the tendency to take too violent exercise. At first it is best to spend several hours of the day sitting or lying out of doors, well wrapped up in cold weather, and sheltered from the wind. Later on, gentle walks may be taken, and the distance walked gradually increased week by week. If your temperature goes up, you are exerting yourself too much. If it goes above 100 degrees you should spend most of the day resting. If your temperature remains normal and your weight increases, you may gradually increase your exercise.

Running, jumping, and all heavy or dusty work are forbidden. Always rest for an hour before and after meals.

3. **TEMPERATURE.**—Take your temperature in the mouth three times a day, before breakfast, after dinner, and at bed time, and record it in your diary. Wash the thermometer in cold water immediately after using it, and keep it in a jar of disinfectant.*

4. **WEIGHT.**—Weigh yourself, if possible, once a week, and keep a record of your weights.

5. **FOOD.**—The ordinary full meals of a healthy man should be taken. Eat slowly, and try to finish your meal, even if you do not feel hungry. Drink two or three pints of boiled milk daily, and avoid alcoholic stimulants, unless specially ordered by the doctor.

Milk is a complete food, but there is no real nourishment in wine, spirits, beer, or stout.

* Disinfectant Solution may be made of Izal, 2 teaspoonfuls to a pint of water, or Carbolic Acid, 2 tablespoonfuls to a pint of water.

PRECAUTIONS AGAINST INFECTION.

PHLEGM.—The phlegm contains the GERMS OF CONSUMPTION, and must never be allowed to dry and get into the dust of the house.

When indoors spit into a mug, and when out of doors into a pocket-spittoon. Empty the mug and spittoon into the fire, and rinse well with hot water. Keep a little disinfectant* in the mug and spittoon.

After coughing, the lips may be wiped with pieces of rag, which should be burnt at once, or with a handkerchief kept in a linen bag, and not loose in the pocket, or under the pillow. Used handkerchiefs should be boiled daily, and the bag once a week.

Consumptives must not be kissed on the lips.

If these precautions are taken, and the room kept airy, light, and clean, there is not much risk of infection. Another person may share such a room, but not the same bed.

Cups, spoons, and other feeding utensils must be kept separate and scalded after using.

Housing and Town Planning Act, 1909.

The carrying out of this Act has progressed steadily and consistently during the year.

It is not easy to show the exact amount of work that has been done, much having been accomplished by representation which cannot very easily be shown on paper. The plan adopted has been to deal with the most pressing cases first, whilst certain areas have been scheduled for regular routine work. The Housing and Town Planning Committee has met from time to time on the regular Board Day, but it has been felt and expressed by certain members that the work is of so important a nature that it almost demands a special day for the consideration of the work. Difficult points not infrequently arise demanding careful thought and a considerable amount of judgment.

When the Act was introduced it was never meant to be oppressive, but to be persistently and firmly administered, and I can certainly testify that that spirit has animated every member of the Committee. It is quite impossible, when directing work of this character, not to cause apparent hardship to some owners, but that has been avoided as much as possible, consistent with due responsibility.

For the guidance of the Council I am taking the liberty of stating below a few of the difficulties which arise when conducting a routine inspection under this Act.

1. First and foremost is the question of so-called "rising-damp," and how best to combat it. It is found that in nearly every instance this results from the absence in the first place of a properly constructed damp course. Various remedies have been suggested and tried by many persons in the past, but up to now I am unaware of any device capable of giving a satisfactory result. To order a new damp-course of blue brick is an expensive procedure, and one not likely to be very acceptable to the owner of old property, whilst at the same time it is the only course open to render some dwellings habitable.

2. Then, again, much difficulty arises in deciding how far one is justified in ordering the reconstruction of ground floors. A most important matter is having a perfectly impervious floor surface, but how seldom is this found? As the result of cheapness, floors are badly laid with materials which very soon show signs of disintegration, the consequence being that the floor becomes irregular, the bricks or tiles get loose, and the surface, instead of resisting water, admits of percolation into the ground below, and after a time dries and emits polluted dust.

3. The paving of many backyards and passages between houses is not infrequently found to consist of very unsuitable material, which in time of rain is quite incapable of preventing the subsoil becoming saturated with moisture.

4. When conducting an inspection many trifling defects are found, defects in themselves apparently not matters of much importance, but when considered further are found essential to comfort and important in securing satisfactory sanitation. They often involve a question between landlord and tenant, and, if left to the tenant, never get remedied.

5. Houses are found in the District where the rooms are small and the surroundings perhaps not everything that could be desired, but which are quite suitable for the occupation of two elderly people. They would be quite unfit for a married man with a family.

When dealing with some of the above conditions, it often requires a large sense of judgment and discretion in deciding how far to go.

Perhaps I have left untouched the question of deciding how far it is possible to remedy a defect without absolutely issuing an order for demolition and reconstruction. Of course it is a very simple matter to say "make an order," but not so easy to justify its recommendation.

WORK DONE UNDER HOUSING AND TOWN PLANNING ACT, 1909.

Parish.	Number of Houses.	Description of Property.	Date of Inspection.	Date of Report to Council.	DEFECTS.	Action taken by Council.	Result of Action.	REMARKS.
SPURBROOK	11	Main Street	August 5th	23rd October	Damp walls, defective floors, privies, and drainage; insufficient light and ventilation ...	Notices served to close 2 and repair 9	Work given out to Contractor for 2 closed	Owner promised to commence work on the other 9 in Spring
	29	Portland Road	Aug. 9, Oct. 27 and 30	December 11th, 1913...	Damp walls, leaky roofs, defective floors and walls, privies and ashpits dilapidated ...	Notices served to repair	Defects at 11 houses remedied	
	2	Clumber Street	Oct 27th and Nov. 17th	Do.	Do.	Do.	Nothing done	
	2	Morris Street	July 21 and Aug 27...	September 18th	Defective roofs, firegrates, coppers, ceilings, and staircase	Notice under Public Health Act, 1875	Defects remedied	
	14	Welbeck Terrace	Nov. 17 and 18	December 11th	Leaky roofs, damp walls, floors and walls bad repair	Notices served to repair	Nothing done	
	23	Warren Terrace	4th March	29th May	Defective roofs, floors, walls, windows, privies, ashpits, and spouting	Do.	Defects remedied	
	17	Byron Street	8th, 9th, and 10th Oct.	December 11th	Defective roofs, floors, walls, spouting, yard surfaces, privies, and ashpits	Do.	Nothing done	
	7	Strutt's Yard	10th March	29th May	Defective roofs, windows, drains, privies, ashpit accommodation, insufficient light and ventilation	Do.	Defects remedied	
	2	Church Hill	October 9th	Not reported	Defective roofs, floors, ceilings, windows, ashpits, damp walls, privies, ventilating into dairy	Preliminary notice served	Do.	
	2	Simpson Dale Terrace ...	November 1st	Do.	Roofs and eaves gutters defective	Do.	Do.	
	1	Victoria Street	October 10th	Do.	Do.	Do.	Do.	
	13	Avondale Terrace	July 10th	Do.	Defective roofs, ceilings, floors, yard surfaces, privies, and ashpits	Not reported	Defects remedied voluntarily	
	16	Nicholson's Row	July 9th	Do.	Do.	Do.	Do.	
	14	Station Road	November 7th	December 11th	Defective roofs, walls, floors, windows, privies, ashpits, sinkstones, steps dangerous and bad repair	Notices served to repair	Nothing done	
	102	Various parts of parish ...	January to December...	Not reported	Taken in course of inspection after infectious disease	Not reported	Defects remedied under Preliminary Notices	
SCARCLIFFE	4	Guildwells	August 8th and 12th ...	23rd October	Defective roofs, windows, floors, walls, privies, ashpits, water supply unfit for drinking	Notices served to repair	Work in progress	
	24	Nesbit Street	26 Feb. and Aug. 8 ...	Do.	Damp walls, defective floors, waste pipes, insufficient privy accommodation, and ventilation shaft to drain broken	Preliminary notices served	Do.	
	3	Mansfield Road	December 12th	Not reported	Defective drainage, cesspool, water supply, and scavenging	Not reported	Defects remedied	
	8	Mansfield Road	July 22nd	29th May	Defective roofs, spouting eaves gutters, drainage and yard surfaces	Notice served under Public Health Act, 1875	Work in progress	
	1	Scarcliffe Village	July 21st	24th July	Defective roof, spouting, paving, privy, drainage, and yard surface ... ..	... ..	...
PLEASLEY	52	Various parts of parish ...	January to December	Not reported	Taken in course of inspection after infectious disease	Not reported	Defects remedied under Preliminary Notices	
	2	Verney Street, New Houghton	December 9th	Do.	Choked drains, damp walls, defective spouting	Do.	Defects remedied by owners	
	7	New Houghton and Pleasley	January to December	Do.	Taken in course of inspection after infectious disease	None needed	Do.	
AULT HUCKNALL	19	Doe Lea	Do.	Do.	Do.	Do.	Do.	
UPPER LANGWITH	16	Langwith Junction	October 6th	Do.	Defective scullery wall, defective paving, insufficient drainage, and no ashpit accommodation	Preliminary notices served	Work in hand	
	1	Langwith Junction	September 3rd... ..	Do.	Inspection made after Scarlet Fever, and no defects	Not reported ... ..	...
GLAPWELL	1	Glapwell	September 6th... ..	September 18th ...	Defective roof, floors, chimneys, walls, insufficient light and ventilation, and water supply unfit for drinking	Owner written with list of defects	Defects remedied	
PINXTON	10	Factory Yard	29th to 31st January ...	... ..	General rising dampness, defective pan tile roofs, paving, and spouting	Notices to repair	Repairs completed	Cottages under-pinned with a damp course
	6	Institute Cottages	24th to 29th January ...	... ..	Defective roofs, eaves spouting, and general repairs ... ..	... ..	Do.	Informal notices
	14	32 to 53, Wharf Road ...	28th February ... ..	... ..	Defective roofs and eaves spouting... ..	... ..	Do.	Do.
	11	Wharf Road	March ... ..	... ..	No defects ... ..	... ..	...
	6	Pool Close	April ... ..	... ..	Uncovered ashpits and general repairs ... ..	... ..	Works completed	Do.
	1	Slade Lane	May ... ..	... ..	Polluted drinking water well, insanitary outhouses, and general repairs	Taken under Public Health Act, 1875	Do.	Well closed
	10	Top Row, Kirkstead	18th June	Not reported	General repairs ... ..	... ..	Work in hand	
	3	Storth Lane	July	Do.	Do. ... ..	... ..	Part work done	Suspended owing to death of the owner
	6	Alfreton Road	August	Do.	Do. ... ..	... ..	...
	25	Widmerpool Street	September	Do.	No defects ... ..	... ..	...
	16	Sleight's Lane	Do.	Do.	Do. ... ..	... ..	...
	7	Paul Pry	November	November	Defective drains, drinking water well, and general repairs	Notices to repair	Works completed	
	28	Park Lane	Do.	Do.	Minor repairs ... ..	... ..	Work in hand	
	12	Alexander Terrace	Do.	Not reported	Do. ... ..	... ..	Do.	
BLACKWELL	7	Talbot Street	Do.	Do.	Do. ... ..	... ..	Do.	
	1	West End	Do.	Do.	Do. ... ..	... ..	Work completed	
	3	Station Road	February	March	General repairs	Public Health Act, 1875	Works completed	
	1	Hilcote Lane	May	Not reported	Do.	Informal Notices	Do.	
	2	New Lane, Hilcote	Do.	Do.	Do.	Do.	Do.	
	5	Station Road, Newton ...	Do.	June	Rising dampness and general repairs	Public Health Act, 1875	Do.	Damp coursing where necessary
	6	New Street, Newton	29th July	Not reported	General rising dampness and general repairs, and ventilation to bedrooms	Informal Notices	All works completed	
	13	New Street, Newton	Do.	Do.	Minor repairs	Do.	Do.	
	3	Ball's Yard, Newton ... ..	... ..	... ..	Unfit for human habitation	3 Closing Orders	Houses closed	
	2	Market Place	3rd February	February	Do.	2 Closing Orders	Do.	
SOUTH NORMANTON	1	Water Lane	4th February	Do.	Do.	1 Closing Order	Work in hand	
	9	Market Place	3rd to 10th February...	Do.	General Repairs, paving, &c.	Repair Orders	Works completed	Informal Notices
	1	Market Street	May	Not reported	Do. ... ..	... ..	...
	1	Winterbank Cottages ...	Do.	May	Do.	To be taken under Public Health Act, 1875 ... ..	...
	16	Bright Street	25th September	October	Do.	Orders to repair	Work well in hand	
	23	West Street	26th September	Do.	Do.	Do.	Do.	
	11	North Street	Do.	Do.	Do.	Do.	Do.	
	1	Berristow Row	Do.	Do.	Unfit for human habitation	1 Closing Order ... ..	...
	6	Berristow Row	Do.	Do.	General Repairs	Repair Notices ... ..	...
	18	Berristow Place	Do.	Do.	Do.	Do. ... ..	...
	5	Birchwood Lane	5th November	2 not reported	Do.	3 Notices under Public Health Act, 1875 ... ..	...	Orders deferred
	5	Hamlet Lane	Do.	November	Do. ... ..	... ..	...
	5	Meadow Lane	Do.	Do.	General repairs, insanitary middens and yard, paving	Repair Orders	Work in hand	
	2	Market Place	Do. ... ..	... ..	General repairs	Do.	Do.	
	1	Lincoln Street	March	March	Do. ... ..	...	...
TIBSHELF	1	Lincoln Street	May	May	Do.	All taken under Public Health Act, 1875	Work well in hand	
	21	Lincoln Street	July	Do.	Do. ... ..	...	...
	2	Back Lane	Do.	Not reported	Do. ... ..	...	...
	1	Biggan Cottage	August ... ..	... ..	Do. ... ..	...	Work completed	Taken under Public Health Act

Report of School Medical Officer.

During the year 1967 routine inspections were made of entrants and children about to leave school. The number of special inspections and examinations totalled 320, and these often involved a prolonged and careful investigation, and at times a correspondence either with the parents of the child or the family medical attendant. In reviewing the past few years, one of the main features brought into prominence is the gradual improvement in the clothing and footwear and the cleanliness of the body.

Speaking generally, there has been a marked change for the better in the nutrition of the children.

Perhaps one of the most annoying features met with is in reference to children about to leave school, but who have not put in sufficient attendances to allow them to leave. The most trifling pretences are advanced as to their unfitness for school work, and in some instances they are supported by medical certificates, issued on printed slips, without any diagnosis ever being given.

In some of the schools it is difficult to find a room sufficiently quiet where the examination can be satisfactorily carried out, the noise outside whilst the children are playing and the sound from other class-rooms very materially interfering with the work.

I have no doubt that in the near future this will be dealt with, and in all the new schools provision is sure to be secured for satisfactorily carrying out the work of medical inspection.

The assistance rendered by the teachers is most ungrudgingly given, and is of the greatest possible value. The interest taken by them in the welfare of the scholars is, in some instances, a matter of personal devotion.

Verminous Conditions.

A vast amount of time and attention is required on the part of the Nurse and school teachers to secure anything like satisfactory results in this work. It is very difficult in some instances to get the parents to co-operate, and even the actual presence of the living insect is barely sufficient to convince them that the children's heads are infected. The extensive outbreaks of impetigo of the head found in some schools is due, I am convinced, to the presence of vermin.

The majority of newly-admitted infants are in a verminous condition. This has the result of keeping up the percentage of verminous cases, which has a very discouraging effect on the nurse and school teachers, and to a large extent discounts their efforts.

Defective Vision.

Roughly speaking, something like ten per cent. of children attending school have some defect of vision. This is a matter of the utmost importance, for there are few conditions which militate against intellectual progress more than bad sight. The headaches of young children can generally be traced to this cause.

Realising this, the County Council have established clinics at various centres in the county where children can attend and receive advice and treatment at the hands of a medical officer devoting his whole time to the work.

Defective Hearing.

It was found that 56 cases of defective hearing occurred, and in nearly every instance they were associated with unpleasant discharge. The hope of securing relief in many instances is very slight, as it seems impossible to make parents realise the importance of cleanliness. Daily syringing and the application of antiseptic drops offer the best means of cure.

I often think a great deal of good might be accomplished by the appointment of a nurse to visit two or three centres in various parts of the district for a time (say, six weeks), where children could attend daily to have their ears properly cleaned and drops applied. At the same time parents could be educated on the lines so imperative if a cure is ever to be obtained.

Tonsils and Adenoids.

If the medical inspection of school children never did anything else than deal with enlarged tonsils and adenoid growths its adoption has been more than justified. Deafness in children, in a large proportion of cases, is due to throat mischief, and the early recognition and treatment of this trouble should therefore materially lessen the percentage of such cases.

Day by day the belief is gaining ground that materials are absorbed by the tonsils and conveyed to other parts of the body, which give rise to a state of disease or ill-health; hence the importance of effectually combatting an unhealthy condition of these organs. Parents, I am convinced, are beginning to realise the importance of paying more attention to these ailments. The mental development of a child may be prejudiced by allowing enlarged tonsils to exist untreated.

Tuberculosis.

I have already written at considerable length in another part of my report on this disease.

The early recognition of any form of tuberculosis is important, for it is in the earliest stages that treatment is more likely to have good results.

When the time comes for the systematic examination of all children attending school, it will be found, in my opinion, that tuberculosis is far more prevalent than has ever before been realised. Every effort is being made in the building of new schools to construct them on lines so as to afford complete ventilation, ample light, and at the same time provide for an adequate supply of heat.

Mental Conditions.

To some extent reliance has to be placed on information obtained from the teachers as to the degree of mental capacity possessed by the children under their care. This information obviously applies to the mild cases, and the knowledge thus obtained is of considerable value. Experience often points to an absence of power to concentrate, and some children appear not to be able to grasp the simplest truths, however often they are repeated to them.

The more pronounced cases speak for themselves; in appearance they are lethargic, often with thick lips, which are fissured, possessing a tonsillar and adenoidal expression, with saliva dribbling from their mouths. They are not infrequently anæmic and badly nourished, with a brain which appears to have ceased to expand. When the family history is enquired into, and the parents interviewed, there is no doubt as to hereditary influence in a great number of these cases. What is to become of them is a most difficult problem. Environment undoubtedly plays an important part—the home life is generally on a very low plane, and parental neglect and indifference are usually conspicuous. Public legislative efforts are under consideration for improving this class of children, but considerable diversity of opinion still exists as to how best to deal with them without inflicting an injustice and without causing pain to the persons directly and indirectly concerned.

Unfortunately, feeble-mindedness is hereditary, and whilst the totally unfit are allowed to marry there is little prospect of effectively stamping out this state of things.

The Clothing of Children.

The improvement in the clothing of children, which I spoke of last year, is still well maintained. It is rare to find a child in rags, but a great deal is still to be desired in the way of underclothing, particularly during the cold winter months.

Contagious Skin Diseases.

The varieties of contagious skin diseases affecting children are few in number. Outside itch and pustular eczema, they are rarely seen. In certain schools in the district pustular eczema has been very prevalent, and this has been a source of considerable anxiety and trouble to the teachers. Every effort was made to combat this troublesome malady, both by the teachers and the nurse appointed by the Education Committee. Large quantities of ointment were supplied to the children free of cost, and detailed instructions were given to the parents with regard to home hygiene. After quite a prolonged fight this disease was practically eradicated from one of the schools in the district where it was exceptionally prevalent. Too much credit cannot be given to the head teacher for the indefatigable efforts made to achieve this desirable end.

School Buildings.

Slowly but surely the derelict schools built 50 years ago are fast disappearing, and in their place the Education Authority are erecting splendid buildings equipped with all up-to-date conveniences and advantages. Particular attention is being paid to the playgrounds, and in some instances covered structures have been provided where the children can play during wet weather. The surface in nearly all cases has been asphalted, a method which obviously secures greater dryness to the feet, and less dust in the hot, dry, summer weather.

Results of Medical Inspection for the year ending December 31st, 1913, in the Rural Sanitary District of Blackwell:—

					1912.	1913.
Number examined	...	...	...	...	1996	1967
Verminous	...	...	...	...	174	222
Ringworm	...	...	...	...	4	1
Other Skin Diseases	...	...	...	...	23	33
Defective Vision	...	...	...	...	89	97
Defective Hearing	...	...	...	...	43	56
Nasal Obstruction from Enlarged Tonsils and						
Adenoids	...	...	...	...	132	114
Phthisis	...	...	...	...	6	4
Other Tubercular Diseases	...	...	...	...	6	6
Deformities	...	...	...	...	8	11
Paralysis	...	...	...	...	0	2
Mental Condition—						
(a) Dull and Backward	...	...	...	...	108	94
(b) Mentally Deficient	...	...	...	...	7	6
Squint	...	...	...	...		23
Blepharitis	...	...	...	...		14
Keratitis	...	...	...	...		2
Ophthalmia	...	...	...	...		1
Astigmatism	...	...	...	...		2
Diphtheria	...	...	...	...		1
Chickenpox	...	...	...	...		2
Anæmia	...	...	...	...		3
Lateral Curvature	...	...	...	...		3
Rickets	...	...	...	...		8
Goitre	...	...	...	...		17

Water Supply.

With the exception of Ault Hucknall, Glapwell, and Scarcliffe, which are perhaps the most rural parishes in the area of the Council, the entire district is well supplied with water of excellent quality. It will be observed, on referring to the table below, that in many of the parishes practically all the houses are supplied.

Bearing in mind the prospective development of land for building purposes in the locality of Langwith Junction, the Council have had under careful consideration certain schemes for providing a public supply to that neighbourhood.

Chemical analyses are made periodically of the various supplies, which have given most satisfactory results.

The fact that only five cases of Typhoid Fever were notified during the year shows pretty conclusively that there is not much wrong with the water.

Water.				Quantity Supplied.
Blackwell	...	...	...	20,480,000
Pinxton	...	...	...	18,402,000
Pleasley	...	...	...	6,222,000
Shirebrook	...	...	...	30,335,000
South Normanton	...	...	...	23,928,000
Tibshelf	...	...	...	13,558,000

Table showing in detail Houses supplied by Public Services.

Name of Parish.	No. of Houses.	Percentage supplied.	Gals. per head per day.	Source of Supply.
Ault Hucknall	374	62	Un-limited.	Sheepbridge Coal & Iron Co.
Blackwell ..	920	91	11.5	{ Sutton Urban Council and Mansfield Corporation.
Glapwell ..	18	0	0	Local wells only.
Pinxton ..	1048	80	9.2	Basford R.D. Council
Pleasley .	457	97	10	{ Mansfield Corporation, The Duke of Devonshire, and Mr. Verney's supply.
Shirebrook ..	1935	97	7	Shirebr'k Colliery Co. supply
Scarliffe ..	564	55	Un-known.	The Bolsover Water Co.
S. Normanton	1289	97	9.7	Sutton Urban Council.
Tibshelf ..	760	99	9.0	Mansfield Corporation.
U. Langwith	122	75	Un-limited.	{ Duke of Devonshire and Mr. Birkitt's Polterwell)

The old water tower at South Normanton has been renovated at a cost of £138. This will ensure an increased storage capacity of 10,000 gallons, in addition to affording a better pressure in the immediate district of the tower itself.

Water Main Extensions.

At Birchwood Lane, South Normanton, a considerable extension has been made at a cost of £77. This was done to meet the request of certain builders who have obtained land on which it has been decided to build a number of houses. The amount stated was contributed jointly by the builders and the Council.

Building operations on a large scale have been sanctioned in the locality of Langwith Junction, which will necessitate provision being made for a new water supply. How to accomplish this satisfactorily will require the best consideration of the Council, as the matter is not without some difficulties.

Sanitary Inspections of the District.

The particulars herewith appended are not included in the Schedule found at the end of this report.

The following is the number and nature of inspections made by the Inspectors during the year under consideration:—

	Northern Division.	Southern Division.
Inspections under Housing and Town Planning		
Act, 1909	1878	3144
Stopped Drainage	62	100
Insanitary Privies and Ashpits	414	640
Paving of Courts and yards	66	33
Eaves and Downspouts	21	86
Defective Urinals	15	7
Offensive Accumulations	42	80
Animals Improperly Kept	12	0
Pig Styes	15	0
Smoke Nuisances	16	7
Overcrowding	20	4
Dirty Houses	80	8
	<hr/> 2641 <hr/>	<hr/> 4109 <hr/>

Closet Accommodation.

It is estimated that there are in the District:—

Water Closets	726
Pail Closets	4223
Privy Middens	2574
Waste Water Closets	24
Sanitary Dustbins	1333
Uncovered Ashpits	14

During the year 419 defective privies and ashpits have been improved, and six houses converted from privy middens to W.C.'s.

There is still in various parts of the district an insufficient number of dustbins, particularly in the parish of Shirebrook, where it has been found that 312 houses are without such accommodation.

This necessitates the deposit of house refuse into the pails which rapidly become filled with all kinds of decomposing matter. There is no doubt that when they receive excreta only they quickly become very offensive, hence a reasonable amount of ash is an advantage. In a colliery district where coal is provided to miners gratuitously the amount of ash produced is relatively very high, and it is therefore of the utmost importance that every house should be provided with a properly constructed bin.

A great deal of refuse might be got rid of if householders would only take the trouble to burn it once. The emptying of pails is incumbent once a week.

Scavenging.

The Council undertake only a portion of the scavenging of the District. The major part is let by contract, and what remains is carried out by private effort, mostly by large colliery companies. This is practically equivalent to contract work. It must be borne in mind that the Colliery Companies are large ratepayers, and they realise that it is quite worth their while to scavenge their own property.

The cost of carrying out the work is as follows:—

Parish.	How Undertaken.	Cost per annum.	Cost per house per annum.
		£ s. d.	s. d.
Pinxton	Council ..	404 13 8	7 6
Tibshelf	Council ..	343 18 8	8 3
South Normanton..	Contract ..	531 13 10	7 10½
Pleasley	Contract ..	251 10 5	11 4½
Shirebrook.. ..	Contract ..	1225 16 9	12 3½
U. Langwith, part of	Contract ..	141 19 8	
Scarcliffe, part of..	Contract ..	32 11 10	
	Sheepbridge Colliery Co.		
Ault "Hucknall",			
greater part ..	Glapwell Colliery Co.		
Blackwell	Blackwell Colliery Co. and Midland Railway Co.		

* }

* These figures are only approximate, as the Census returns giving the number of occupied houses in each parish are not yet to hand. The figures, however, may be regarded as reliable.

Number of houses scavenged by Council—1,873.

Cost of same—£748 12s. 4d.

Cost per house—7s. 10½d.

Number of houses scavenged by contract—3,787.

Cost of same—£2,009 1s. 0d.

Cost per house—10s. 7d.

Number of houses scavenged by private owners, consisting chiefly of large Colliery and Railway Companies—2,000.

The cost of scavenging has considerably increased during the year. The cost per house when the work is undertaken by the Council works out at 25 per cent. less than when it is done by contract.

The expense is largely governed by the distance the material has to be carted, and the facilities available for converting it into a marketable product.

The refuse which is not disposed of to farmers is either deposited on to tips or utilised for the manufacture of artificial manure. Suitable tipping accommodation at South Normanton and Tibshelf is getting difficult to find, and unless convenient sites can be ob-

tained the only alternative will be the provision of a refuse destructor. It is impossible to estimate the importance of securing water-tight pails, for there is no greater nuisance than a leaky pail.

Unfortunately, pure ashes constitute only a small proportion of the household refuse. Large quantities of dry, shaly substance, together with broken pots and tins, are deposited in the receptacles, and all these materials quickly consolidate into a substance resembling concrete. When this occurs it is only removed with some difficulty and necessitates unnecessary force being applied to the pails, thus causing damage, and so shortening their life.

The provision of new pails after the original ones are worn out is a matter worth the consideration of the Council. It is found from practical experience that, however good a privy floor may be, the constant action of urine will very soon cause disintegration of the surface, and so allow effete matter to find its way into the subsoil. Pails are emptied once a week, and in some cases twice weekly, which should meet all needs.

In all newly-erected houses the enforcement of the provision of water closets would add considerably to the comfort and well-being of the tenants.

The longer decomposing matter is allowed to remain in the vicinity of a dwelling the greater menace it becomes to health.

Back Yards.

The Inspectors have had special instructions to pay attention to the condition of the backyards, to see that the surface is kept good, and that the drainage is not allowed to get out of order. It has been found necessary to serve a number of notices to make defects good.

Back Streets.

Back streets, as they now exist, render the task of keeping them in a satisfactory condition almost an impossibility. In most instances they have no proper foundation, and the surface is gener-

ally made up of engine ashes, crushed clinkers, and other materials which readily disintegrate, forming irregularities which in time of rain become slopwater lagoons. However careful the scavenger may be to see that no slopping takes place, the ground over which he passes is almost of necessity compelled to be polluted. This could be obviated to a very great extent if there was an enforcement that these back streets be constructed with the same care that is used in forming the main streets, and that they be paved, channelled, and drained in like manner. Unless this is done decomposing and effete matter is bound to find its way into the soil adjoining the houses.

Slaughter-Houses.

The registered slaughter-houses in the District number 29. During the year 158 visits were paid by the Inspectors of Nuisances. It has been felt that frequent visits are advisable, as they have the effect of preventing the slaughtering of unsuitable (slink) and diseased cattle.

The adoption of bye-laws has very considerably assisted the work of the Inspectors, and during the year they have been enabled to compel the carrying out of many improvements.

Bakehouses.

The number of bakehouses registered under the Factories and Workshops Act is eleven, all of which have received frequent visits by the Inspectors during the year. In their opinion the places are in a satisfactory condition.

Cowsheds, Dairies, and Milkshops.

Regulations with respect to Cowsheds, Dairies, and Milkshops are in force throughout the District. The effectual carrying out of these regulations would involve more time than can possibly be given by the present staff. During the year 447 visits were paid by the Inspectors, and 28 notices served for drainage, insufficient air space, and ventilation.

Disinfecting Arrangements.

For disinfection to be efficacious there must be complete destruction of the offending germ, and this may be effected by heat or by chemical methods. I am convinced there still exists a large amount of ignorance in the public mind on this important subject, for one has only to cite the feeble methods adopted even by intellectual people. The tenacity of the life of micro-organisms is not hung on such a tender thread as to be influenced by the exposure of plates containing a disinfectant, or cups containing Condyl's Fluid placed in an infected room. Few germs are able to survive boiling, hence the simplest and cheapest method in innumerable cases is simply to boil infected materials and utensils.

The disinfection of rooms and large closed spaces, such, for instance, as school-rooms, may be carried out by fumigating with formic aldehyde, after seeing that all points of exit have been closed. The spraying of certain chemical substance on to walls and floors promises a reasonable hope of successfully destroying the injurious effect of contaminated dust.

It will be remembered that during the year the Council, realising the importance of this work and the time occupied in carrying it out, decided to relieve the Inspectors of Nuisances of this duty by appointing an extra staff of men for the purpose, to be under the superintendence of the Inspectors.

A new high pressure steam disinfector has been purchased from Messrs. Manlove, Alliott, & Co., at a cost of £251 3s. 0d., and installed on the sewage farm at South Normanton, for the use of the four southern parishes, viz., Blackwell, Normanton, Pinxton, and Tibshelf.

In addition, two carts have been provided for conveying infected and disinfected materials to and from the disinfecting station.

The whole District may now be considered to be thoroughly equipped with means for subjecting infected bedding, etc., to thorough disinfection. The portable disinfector which formerly had

to serve the entire area is now permanently stationed on the sewage outfall works at Shirebrook.

The amount of work done during the year was as follows:—

	Northern District.	Southern District.
Bedding, Clothing, Miscellaneous Articles ...	657	350
Rooms Disinfected	324	175
Schools	3	13
(This may mean 7—8 rooms in each School.)		
Houses for Phthisis	12	14

Road Improvements and New Streets.

With reference to making good certain streets and secondary ways referred to in my report for 1912, it was thought desirable to apply for powers under the Public Health Amendment Act, 1907, but on further consideration it was decided to apply to the Local Government Board for an order to put into force the Private Street Works Act, 1892, and Section 150 of the Public Health Act, 1875, to carry out the work.

Plans are now being amended by the Surveyor, in accordance with the requirements of the Local Government Board. It is of importance that this matter be settled within a reasonable time so as to enable the Council to carry out certain improvements which require early attention.

The above remarks apply to the following parishes, with the required number of streets stated in each:—

Blackwell	18 streets and secondary ways.
Pleasley	17 do.
Shirebrook	25 do.
Tibshelf	19 do.
South Normanton	4 do.

With regard to other parishes of the District there is nothing urgently requiring attention.

Surface Drainage.

Pinxton.

The surface drain which was constructed from Kirkstead to Slade Lane needs to be extended, thereby enabling the whole of the surface water in that section of Pinxton to be efficiently dealt with.

Certain complaints having been made with respect to the flooding of the area known as the Factory Yard, numerous inspections were made with the object of ascertaining how best to deal with the matter. It was found to be caused by the silting up of an old culvert, thereby diverting the water along the old and disused tramway passing behind Factory Yard.

After due consideration it was realised that the only way of effectively dealing with the nuisance was either to clean out the old culvert, and reconstruct it (as it was found to have subsided in the middle owing to the effect of coal workings), or to construct a new drain directly from the end of Mill Lane into the Erewash. This question needs to be settled to remedy a nuisance which has been in existence for a considerable time past, and there is no reason why the matter should not be finally disposed of without further delay.

Shirebrook.

Complaints having been made of the flooding of Station Road, due to the want of a surface drain to convey water from Langwith Road, a scheme has been prepared and the work has been let by contract at a sum of £78.

A Public Convenience.

For some time the necessity of providing a public convenience in Shirebrook has occupied the attention of the Council, and a suitable site has at last been obtained near the Market Place.

Plans were prepared during the year, pending a suitable site being obtained. As this matter is now settled, there is every reason to believe that the work will shortly be carried out.

SEWAGE DISPOSAL WORKS.

No.	Parish.		Situation of Works.	Population Served.	Method of Treatment.	Area of Works.	Character of Effluent.	Effluent Discharges Into.	Remarks.
1.	BLACKWELL	(a)	Primrose Hill	1,200	Septic tank and two circular percolating filters	1 acre	Satisfactory ...	Tributary of the River Amber	
2.	"	(b)	Newton Green	1,900	Septic tank and Irrigation	3 acres	Not satisfactory ...	Tributary of the River Amber	
3.	"	(c)	Westhouses No. 1	478	Septic tank and Irrigation	2½ acres	Not satisfactory ...	Tributary of the River Amber	
4.	"	(d)	Westhouses No. 2	500	Septic tank and Irrigation	2 acres	Not satisfactory ...	Tributary of the River Amber	
5.	"	(e)	Hilcote and B Winning	680	Septic tank and two circular percolating filters	½ acre	Satisfactory ...	Tributary of the River Amber	
6.	PINXTON	(a)	Wharf—Main Outfall	5,000	Septic tanks and three circular percolating filters	1 acre	Satisfactory ...	River Erewash	
7.	"	(b)	Near Pinxton New Colliery		Septic tank, ashes, tip, and laud		Satisfactory ...	River Erewash	For storm water only
8.	"	(c)	Brookhill Lane	100	Septic tank and rectangular filter	½ acre	Satisfactory ...	Tributary of River Erewash	
9.	"	(d)	Beaufit Lane	180	Septic tank and two circular percolating filters	¼ acre	Satisfactory ...	Tributary of River Erewash	
10.	PLEASLEY	(a)	High Level Works between M.R. and G.N. Railways	2,000	Septic tanks, 2 detritus chambers, and 2 circular percolating filters	5,330 square yards	Satisfactory ...	River Meden	Storm water treated on No. 10.
11.	"	(b)	Low Level, south of G.N. Railway	400	Septic tanks, 1 detritus chamber, 1 rectangular percolating filter, and large storm bed	3,448 square yards	Not satisfactory ...	River Meden	The Low Level Works deal with the whole of the storm water
12.	SCARCLIFFE	(a)	Hillstown	1,300	Circular septic tank and irrigation	1 acre			Tank effluent percolates into magnesium rock fissures, and lost to view
13.	"	(b)	Langwith Colliery	250	Chemical Precipitation and Polarite Beds..	¼ acre	Satisfactory ...		
14.	SHIREBROOK		Near Midland Station	12,000	Septic tanks and four percolating filters	14½ acres	Satisfactory ...	Sookholme Brook, a tributary of the River Meden	
15.	SOUTH NORMANTON	(a)	Main Outfall Works, off Dirty Lane	6,500	Septic tanks and rectangular and circular percolating filters	6 acres	Part satisfactory & part not satisfactory ...	Normanton Brook, a tributary of River Amber	Another 60ft. circular percolating bed is urgently required
16.	"	(b)	Birchwood Lane	160	Septic tank and two rectangular filters	½ acre	Satisfactory ...	Tributary of River Erewash	
17.	"	(c)	Berristow	160	Septic tank and one rectangular filter	½ acre	Satisfactory ...	Tributary of River Erewash	
18.	TIBSHELF		Near Midland Railway Station	4,000	Septic tanks, circular percolating filter, Irrigation, and Ashes Tip	2½ acres	Satisfactory ...	Tributary of River Amber	
19.	AULT HUCKNALL		Doe Lea Cottages	1,240	Chemical Precipitation and Polarite Beds	½ acre	Satisfactory ...	Doe Lea	

Sewerage and Sewage Disposal.

Blackwell.

The Newton Disposal Works for a long time have been in an unsatisfactory condition, as they were incapable of efficiently dealing with the sewage from Newton. It has been decided to construct suitable works, consisting of sedimentation tanks and percolating filters, with other accessories for carrying on the work of purification, at an estimated cost of £1,077. The tanks have already been completed, and it is hoped that the work will be completed during 1914. The Council decided to defray the cost out of current rates.

Westhouses.

The sewage from this hamlet at the present time is being dealt with at two outfall works, neither of which are giving satisfactory results, particularly in the case of No. 1, where the reconstruction of the existing tank and the supplementing of percolating filters are required.

Regarding Outfall No. 2, there is already a suitable tank in existence, but no provision has yet been made for percolation. It is therefore advisable to construct two new filter beds.

It must be borne in mind that the Parish of Blackwell has, unfortunately, a very undulating surface, which makes it impossible to deal with the drainage in one inclusive scheme.

South Normanton.

The new sewer in Carter Lane was completed in the spring. This has had the effect of connecting up that section of the parish with the main outfall works.

Building operations in this district remain in abeyance, pending the construction of a main sewer. New houses are now in course of erection, and this promises within the near future to become quite a populous area.

The construction of new sewers and the increasing population of the parish are taxing the main outfall works to their utmost capacity, so that it has now become incumbent on the Council to take such steps to render the works capable of dealing effectually with the sewage of the whole place.

This can only be accomplished by the construction of additional filter beds and by increasing the present means of dealing with storm water.

For a long time past the works have not been able to adequately treat the sewage of this parish.

Scarcliffe.

As a preliminary, a sedimentation tank has been constructed at Palterton capable of dealing with the whole of the sewage from this hamlet. It is the intention of the Council during the coming year to complete the works by laying down suitable filtering accommodation.

Any material increase in the parish itself will necessitate the construction of new outfall works, but at present, after due consideration, it has been thought advisable to await future developments.

Tibshelf.

No provision has yet been made for the drainage of that portion of the parish known as Lane End. Negotiations are now in progress with the trustees of St. Thomas's Hospital for acquiring a site suitable for the construction of outfall works.

Upper Langwith.

The scheme for dealing with the sewage from that part of the parish known as Langwith Junction is rapidly approaching completion, and ought in the early part of 1914 to be connected up with the Shirebrook outfall works. At the completion of this work there will be nothing to prevent intending builders commencing the erection of new houses in that neighbourhood, which are badly needed. The people living in the district may congratulate themselves upon the fact that the sewage is not likely to cause any nuisance in future, as its purification will be carried out at a considerable distance from the houses in which they reside.

River Pollution and Silting Effects.

The silting up of the Normanton Brook has been effectively dealt with conjointly by the Blackwell Colliery Company and the Council, at a total cost of £239.

The River Erewash at Pinxton has been found to be highly polluted with materials from the coke ovens situated near the Main Street. The Nottinghamshire County Council have had this matter under consideration, as the river divides the two counties.

Attention has been called to the condition of the stream running through the hamlet of Stony Houghton. On inspection it was found to be highly polluted by sewage from most of the houses in that locality. This is a matter calling for urgent attention, as the river feeds extensive water-cress beds below. Should the stream at any time become contaminated with infected material an outbreak of fever might occur.

ANNUAL REPORT OF SANITARY INSPECTOR.

BLACKWELL (NORTHERN) SANITARY DISTRICT.

Name of Inspector, JAMES ALFRED JAMES.

Area of District, 13,808 acres. Estimated No. of Houses, 3,506.

New Houses erected, 1913—12.

HOUSING AND TOWN PLANNING—

Number of Houses Inspected under Section 17.	393
Number unfit for habitation	3
Representations made to Local Authority as to Closing Orders	2
Closing Orders made	2
Number repaired without Closing Order	261
Number closed voluntarily	1
Number Repaired voluntarily	52

	Number of Informal Notices Served by Sanitary Inspector.	Number of Legal Notices Served by Local Authority.	Number of Nuisances Abated with or without Notice.
DRAINAGE—			
Defective Traps, Inlets, & Drains	11	1	11
Drains Obstructed	31	4	46
CLOSETS AND ASHPITS—			
Insanitary Privies, Pail Closets, and Ashpits	138	24	128
Additional Closet Accommodation	—	—	7
OTHER DEFECTS—			
Paving of Courts and Yards ...	22	11	20
Eaves-Spouts and Down-Spouts	7	—	7
Urinals Defective	3	—	3
Water Supply	—	—	1
Offensive Accumulations ...	14	—	14
Animals improperly kept ...	3	—	3
Pigsties	5	—	5
Smoke Nuisances	3	1	3
Overcrowding	4	—	4
Foul Condition of Houses ...	16	1	16
Nuisances not specified above ...	9	1	9
Totals...	266	43	277

	Number on Register.	Inspec- tions Made.	Notices Served.	Nuisances Abated with or without Notice.
Dairies, Cowsheds, and Milkshops ...	93	200	21	21
Bakehouses	4	20	—	—
Slaughterhouses	15	82	2	2
Offensive Trades	2	9	—	—
Totals...	114	311	23	23

Infected Rooms Disinfected, 324. Method: Formalin Spray and Formic-aldehyde Vapour.

Samples submitted for Examination: Water—2.

Food Voluntarily Surrendered—152lbs. of tinned foods.

(Signed) JAMES ALFRED JAMES.

ANNUAL REPORT OF SANITARY INSPECTOR.

BLACKWELL RURAL (SOUTHERN) SANITARY DISTRICT.

Name of Inspector, S. WILMOT, C.R.S.I., M.S.I.A.

Area of District, 7,297. Estimated No. of Houses, 4,254.

New Houses erected 1913—71.

HOUSING AND TOWN PLANNING—

Number of Houses Inspected under Section 17 ...	...	...	333
Number unfit for habitation ...	...	...	7
Representations made to Local Authority as to Closing Orders	...	...	7
Closing Orders Made ...	...	...	7
Number Repaired without Closing Order ...	...	...	110
Number Closed ...	...	...	5
Number Repaired Voluntarily ...	...	...	40

Number of Informal Notices Served by Sanitary Inspector.	Number of Legal Notices Served by Local Authority.	Number of Nuisances Abated with or without Notice.
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DRAINAGE—

No Disconnection of Waste Pipe	2	...	1	...	4
Defective Traps, Inlets, & Drains	14	...	2	...	25
Drains Obstructed ...	25	...	3	...	38

CLOSETS AND ASHPITS—

Insanitary Privies, Pail Closets, and Ashpits ...	48	...	7	...	291
Additional Closet Accommodation	2	...	—	...	—
Conversion of Privies into W.C.'s	3	...	—	...	6
Defective Water Closets ...	8	...	—	...	11

OTHER DEFECTS—

Paving of Courts and Yards ...	13	...	2	...	12
Eaves-Spouts and Down-Spouts	35	...	22	...	100
Urinals Defective ...	2	...	—	...	2
Water Supply ...	3	...	3	...	3
Offensive Accumulations	27	...	—	...	53
Animals improperly kept	4	...	4	...	4
Smoke Nuisances ...	1	...	—	...	1
Water in Cellars ...	2	...	—	...	2
Foul Condition of Houses	6	...	2	...	6
Nuisances not specified above ...	5	...	5	...	5

Totals...	200	...	51	...	563
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	Number on Register.	Inspec- tions Made.	Notices Served.	Nuisances Abated with or without Notice.
Dairies, Cowsheds, and Milkshops ...	82	247	7	12
Bakehouses ...	7	20	2	2
Slaughterhouses ...	14	76	—	8
Totals...	103	343	9	22

Infected Rooms Disinfected, 175. Method: Lamp and Spray.

Samples submitted for Examination: Water—18.

Particulars of Prosecutions—5; damage to sewage farms and filter beds.

Food Voluntarily Surrendered—1 pig, 1 carcase of Beef, 25 Couples of Rabbits, 198 Tins of Food.

Other Action taken—13 Schools disinfected.

(Signed) S. WILMOT, C.R.S.I., M.S.I.A.

Factories and Workshops.

The factories situated in the District are two, both at Pleasley Vale, and owned by Messrs. W. Hollins & Co., Ltd. These have been periodically inspected during the year.

The following is a list of the workshops found in each parish of the District, and classified according to the various trades:—

	Ault Hucknall	Blackwell	Glapwell	Pinxton	Pleasley	Shirebrook	Scarliffe	South Normanton	Upper Langwith	Tibshelf	Total
Aerated Waters ..	..	..	..	..	..	1	..	..	..	..	1
Bakehouses .. ..	..	..	..	2	..	3	..	4	1	2	12
Boot Repairing ..	3	3	..	5	2	10	3	4	..	3	33
Blacksmith	1	2	1	3	1	3	2	4	..	3	20
Brick Making ..	2	..	..	..	..	1	..	2	..	1	6
Chemical Works..	..	1	..	1	..	..	..	..	..	..	2
Corn Milling ..	..	..	..	1	..	..	..	..	..	2	3
Cycle Repairing ..	1	2	..	1	..	3	..	1	..	2	10
Dressmaking ..	5	4	..	5	3	20	4	3	1	3	48
Engine Cleaning..	..	1	..	..	..	..	..	..	1	..	2
Gas Works	1	1	..	1	1	1	..	..	..	1	6
Hosiery Finishing ..	15	..	..	2	..	3	..	8	..	24	52
Joinery.. .. .	2	4	..	4	..	4	1	3	..	4	22
Millinery	1	..	..	1	..	8	2	3	..	3	18
Malting .. ..	..	..	..	..	..	..	..	..	1	..	1
Printing .. ..	..	..	..	2	..	1	..	1	..	1	5
Plumbing .. ..	..	..	..	1	..	..	..	2	..	1	4
Saddlery .. ..	..	..	..	1	..	1	..	..	..	1	3
Saw Milling ..	1	1	..	3	1	2	1	1	..	2	12
Tailoring .. ..	..	..	..	..	..	1	..	..	..	..	1
Waggon Repairing ..	..	..	..	2	..	..	..	..	1	..	3
	17	34	1	35	8	62	13	36	5	53	264
Workplaces	4	..	..	..	2	5	1	..	..	..	..

Annual Report of the Medical Officer of Health for the year 1913,
for the Blackwell Rural District Council, on the administration
of the Factory and Workshop Act, 1901, in connection with

FACTORIES, WORKSHOPS, LAUNDRIES, WORKPLACES,
AND HOMEWORK.

1.—INSPECTION.

Including Inspections made by Sanitary Inspectors or Inspectors of
Nuisances.

		Inspec- tions.	Written Notices.	Prose- cutions
Factories (including Factory Laundries) ...	...	3	0	0
Workshops (including Workshop Laundries) ...	...	366	11	0
Workplaces (other than outworkers' premises in- cluded in Part 3 of this report)...	... ..	160	0	0
		—	—	—
Total...		529	11	0

2.—DEFECTS.

Nuisances under the Public Health Acts—

			Found.	Reme- died.
Want of Cleanliness ...	... ..	...	9	9
Other Nuisances ...	... ..	...	4	4

Offences under the Factory and Workshop Act:—

Breach of special sanitary requirements for Fac- tories and Workshops (ss. 5 to 9) ...	...	3	3
		—	—
Total... ..	...	16	16

3.—HOME WORK.

Outworkers' Lists, Section 107—

	Lists received from Employers. Sending twice in the year. Outworkers.			Sending once in the year. Outworkers		
	Lists.	Con- trac- tors.	Work- men.	Lists.	Con- trac- tors.	Work- men.
Wearing Apparel (1) making, &c.	8	16	50	7	7	14

4.—REGISTERED WORKSHOPS.

Total number of Workshops on Register at end of year... 204

J. O. LITTLEWOOD,

Medical Officer of Health.

Form sent to every case of Typhoid Fever notified.
BLACKWELL DISTRICT COUNCIL.

TYPHOID FEVER.

NOTICE TO OCCUPIERS OF INFECTED HOUSES.

It has been brought under my notice that Typhoid Fever is present in your house. You are enjoined by the Public Health Act 1875 (a) not to allow any person so suffering to leave your premises, (b) or allow any article of clothing worn by the patient to be removed therefrom without previous disinfection.

The penalty imposed for each offence being £5.

Rules for Preventing Spread of Typhoid Fever.

1. The patient should be confined to one room, and no one but the person in attendance should be allowed to enter the room.
2. Curtains, bedhangings, and carpets, and all other articles of dress and unnecessary furniture should be removed before the patient is allowed to enter.
3. Bedclothes and soiled linen worn by the patient, and all such articles as cups, glasses, and spoons must not be removed from the room until they have been well disinfected.
- 4.—Ventilation.—This should be secured by opening the windows, and if there be a grate in the room, a fire should be lit.
5. No article of food should be kept in the sick room, and all unconsumed food at once destroyed. The hands of the nurse should be well washed, and the nail brush freely used after attending to the patient, and before taking food. Food should never be eaten in the sick room.
6. Note well that infection is the same in all cases, whether mild or severe.

Directions for Disinfection.

The infection of Typhoid Fever is chiefly conveyed through the discharges given off by the bowels and bladder. It is, therefore, of the first importance to see that these excretions are properly disinfected as soon as passed.

This may be done by placing Carbolic Acid Powder or Chloride of Lime in the utensils before use, and afterwards freely powdering the discharges with the same disinfectants.

The motions should never be thrown into a privy or on to an ashpit, and if not scavenged by the Local Authority, should be buried some distance from the house with a liberal supply of Chloride of Lime added.

During the progress of the case all soiled linen should be removed from the bed and immediately placed in a vessel of water, to which a large handful of common washing soda has been added. It should be allowed to stand a few hours and afterwards well boiled in the copper.

Cups, glasses, and spoons used in the sick room should be boiled in strong soda and water before they are allowed to be removed from the room.

Special care should be exercised when removing the excretions so as not to permit any portion to fall on the floor, or contaminate any article of clothing.

JOHN O. LITTLEWOOD,
Medical Officer of Health.

Mansfield.

BLACKWELL RURAL DISTRICT COUNCIL.

Outbreak of Scarlet Fever.

Owing to the prevalence of Scarlet Fever throughout the District, it is thought advisable to recommend that your Schools be thoroughly cleansed and disinfected before re-opening after the Summer Holidays.

The following suggestions are likely to prove of some value in carrying out the work:—

1. That all woodwork be thoroughly washed with soap and water and the floors scoured with strong soda and water.
2. That all ceilings be limewashed.
3. That the slates be boiled in strong soda and water.
4. That the offices be thoroughly cleansed and limewashed, and the urinals and drains disinfected and freely flushed.
5. That during the holidays all windows and doors be left open so as to secure through ventilation.

That in addition to the above recommendations, special fumigation be undertaken by the Inspector of Nuisances in such schools where Scarlet Fever has been specially prevalent.

JOHN O. LITTLEWOOD, D.P.H.,

Mansfield.

Medical Officer of Health

Form sent to every case of Scarlet Fever notified.

BLACKWELL DISTRICT COUNCIL.

SCARLET FEVER.

NOTICE TO OCCUPIERS OF INFECTED HOUSES.

It has been brought under my notice that Scarlet Fever is present in your house. You are enjoined by the Public Health Act, 1875 (1) not to allow any person so suffering to leave your premises, (2) or allow any clothing to be removed therefrom without previous disinfection.

The penalty imposed for each offence being £5.

Rules to be observed for Preventing Spread of Infection.

1. A Patient suffering from Scarlet Fever should, where practicable, be confined to one room, preferably at the top of the house, and into which none but the person in attendance should enter.

2. Curtains, Bedhangings, and Carpets, and all other articles of Dress and unnecessary furniture should be removed before the patient is allowed to enter.

3. The room should be well ventilated by opening the upper sash of the window. The communication through the chimney should be maintained.

4. Sputum, vomit, urine, and fæces should be received into vessels containing some disinfectant (a large tablespoonful of Chlorinated Lime to $\frac{3}{4}$ -pint of water), before being removed from the room.

5. Discharges from the nose, mouth, and throat should be received into pieces of rag and immediately burnt.

6. All such articles as cups, glasses, and spoons used in the sick room should be placed in strong soda and water, and subsequently boiled before leaving the room if possible.

7. All soiled linen should be plunged into a vessel of water containing a large handful of common washing soda. It should be allowed to stand for a few hours and afterwards well boiled either in a copper or large iron pot.

8. No article of food should be allowed to remain in the sick room, and any unconsumed food should first be disinfected and then destroyed, by burning, if possible.

9. The skin of the patient should be kept scrupulously clean.

10. The attendance on the patient should be confined to one person **only**, who, when compelled to leave the sick room, should avoid mixing with the other members of the household. The hands should be washed with 20 per cent. Carbolic Soap.

11. Visitors should not be allowed to the house for at least seven weeks from the commencement of the disease, and then only by the permission of the Medical Attendant.

12. During the last week of convalescence, it is advisable to subject the entire body to a good soaping once daily.

JOHN O. LITTLEWOOD,

Mansfield.

Medical Officer of Health.

Form of Handbill to be distributed in the District.

BLACKWELL DISTRICT COUNCIL.

SCARLET FEVER.

Scarlet Fever is extremely catching, particularly in the early stages, whilst the Fever is high and the Throat sore, and the danger of infection is the same in all cases, whether mild or severe.

PRECAUTIONS TO PREVENT SPREAD:—

Every child suffering from Scarlet Fever must be separated from all other children for at least 7 weeks after the appearance of the rash.

All the Children in the infected house should be kept from School, and from playing or going about with other children.

The inmates of an infected house should not go to Church or Chapel or attend any public gathering whatever.

“Neighbouring” should be strictly prohibited, and no person should be allowed to visit an infected house until after the peeling of the patient has completely ceased, and the disinfection of the house has been carried out.

As infection exists in the peeling of the skin, the patient must not appear on the public highway until the peeling has entirely ceased.

TAKE NOTICE *that the exposure of infectious persons in public is punishable by law. The Public Health Act, 1875, imposes a penalty of £5 for each offence, and the penalty for such exposure will be enforced.*

JOHN O. LITTLEWOOD,

Medical Officer of Health.

Form of Handbill to be distributed in the District.

BLACKWELL RURAL DISTRICT.

MEASLES.

Measles is a dangerous disease, and is extremely catching.

EARLY SYMPTOMS: Severe cold in the head for 72 hours, before the blotchy rash appears.

Consider every severe Influenza cold as possibly Measles.

PRECAUTIONS TO PREVENT SPREAD:—

Every child suffering from Measles *must* be separated from all other Children for at least 3 weeks after the appearance of the rash.

All the Children in the infected house shall be kept from School for a period not less than 3 weeks after the commencement of the last case.

“Neighbouring” should be strictly prohibited, and no person should be allowed to visit an infected house until 3 weeks have elapsed since the last case first commenced.

You should in every case call in a Medical Man.

TAKE NOTICE *that the exposure of infectious persons in public is punishable by law. The Public Health Act, 1875, imposes a penalty of £5 for each offence, and the penalty for such exposure will be enforced.*

JOHN O. LITTLEWOOD,

Medical Officer of Health.

Form of Handbill which has been distributed in the District.

BLACKWELL RURAL DISTRICT.

PREVENTION OF SUMMER DIARRHŒA.

This disease only occurs after a prolonged period of heat, and is in a great measure avoidable by the exercise of ordinary care and attention.

The disease is caused by a germ entering the body through bad air, impure water, and contaminated food.

The necessary precautions to be observed are:

1. See that all parts of the house are well ventilated night and day.
2. Decomposing refuse of all kinds should be removed from the house and its immediate neighbourhood.
3. The gullies in connection with the house drains should be frequently flushed during the day, and any faulty drains from which a stench is noticed to arise should be at once reported to Messrs. S. Wilmot, Pinxton, or J. A. James, Shirebrook.
4. Food during hot weather rapidly undergoes decomposition, and the greatest care should be observed in the selection only of such as is perfectly fresh and sound, and should never be allowed to remain an unnecessary time in occupied rooms.
5. It is highly essential that food should be thoroughly cooked, animal as well as vegetable, and that the milk should be boiled as soon as received from the hands of the milkman, covered over, and subsequently placed in a cool cellar or larder free from dust.
6. Unripe or over-ripe fruit should be strictly avoided.
7. Children under nine months of age should receive nothing except milk or milk and water, well boiled, except when the milk is obtained from the mother's breast.
8. Feeding-bottles, food-utensils, and any receptacle used for the storage of milk and food should be kept scrupulously clean, and well scalded before use.
9. It is wise to call in Medical aid early, before the disease has had time to make itself seriously felt, and no resort should be made to quack remedies.
10. The above remarks are intended to serve as a guide for the prevention of Summer Diarrhœa in Adults as well as in Infants.

JOHN O. LITTLEWOOD,

Medical Officer of Health.